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ABSTRACT

The goal of the Kentucky Deaf-Blind Intervention Program was to provide training and technical assistance to improve the quality of special education and related services in integrated environments. The program worked with families and service providers for individuals ages birth through 21 who have dual sensory impairments, with special emphasis on individuals above and below mandatory school age. Specific objectives and activities involved: (1) identifying needs and representing the interests of individuals with dual sensory impairments in Kentucky; (2) providing local consultation to families and providers; (3) developing preservice and inservice training regarding dual sensory impairments as part of Kentucky's Comprehensive System of Personnel Development; (4) implementing training and services for young children under age 5, based on Kentucky's state plans under Public Law 99-457 (Parts B and H); and (5) institutionalizing coordination of transition through the Individual Transition Plan process and personal futures planning. This final report, focusing on Project Year 1991-92, describes project accomplishments; project outcomes; problems, solutions, and additional needs; and products developed. Samples of several products are included, such as a project brochure, newsletters, directories, and a draft of a paper titled "Developing Programs for Students with Severe Handicaps Using Basic Skills in the Context of Age-Appropriate Priority Activities" by Melissa E. Hudson and Jennifer L. Leatherby. Appendixes contain project summaries and impact data for the two prior years of the project. (JDD)

ED352788

SERVICES FOR CHILDREN WITH DEAF-BLINDNESS
CFDA-84.025A - STATE AND MULTI-STATE PROJECTS

FINAL PERFORMANCE REPORT

PROJECT NUMBER: H025A90008-91

PROJECT TITLE:

Kentucky Department of Education
Services for Deaf Blind Children and Youth

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PROJECT START DATE: October 1, 1989
PROJECT END DATE: September 30, 1992

GEOGRAPHIC AREA SERVICE: Kentucky

DIRECT SERVICE OFFERED BY PROJECT:

AGE/S OF CHILDREN: Birth to 21 years
*NO. OF CHILDREN: 113

TECHNICAL ASSISTANCE:
*NO. OF PARENTS: 85
*NO. OF TEACHERS: 185
*NO. OF ADMINISTRATORS: 52

* Numbers for 1991-1992 Project Year ONLY. See Appendices A and B for previous years.

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Please note that the information contained in Sections II and III of this Final Report relate to the Project Year 1991-92. Detailed information regarding project progress was submitted at the end of 1990 and 1991 in a final report and will not be repeated here. For the readers' interest, copies of Project Summaries and Impact Data for these years in included in Appendix A (1989-90) and Appendix B (1990-91). Sections IV and V cover global issues that cut across all three years of the project. If additional information is needed please contact:

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AGENCY LIST/ABBREVIATIONS

ADA	American Disabilities Act
CHR	Cabinet for Human Resources (state agency)
CSPD	Comprehensive System of Personal Development
DBIP	Deaf-Blind Intervention Program (UK)
DEC	Division of Early Childhood (KDE/OLPD)
DECS	Division of Exceptional Children Services (KDE/OSIS)
DMR	Division of Mental Retardation (CHR)
DSI	Dual Sensory Impairments
DSLN	Division of Special Learner Needs (KDE/OLPD)
DVR	Division of Vocational Rehabilitation (KDE)
HKA	Helen Keller Affiliateship (DVR)
HKNC	Helen Keller National Center
ICC	Interagency Coordinating Council
IDEA	Individuals with Disabilities Education Act
IEP	Individual education plan
IFSP	Individualized Family Service Plan
IHDI	Interdisciplinary Human Development Institute
IITP	Interagency individual transition plan
KDE	Kentucky Department of Education (state agency)
KEIS	Kentucky Early Intervention System (CHR/DMR)
KERA	Kentucky Education Reform Act
KSB	Kentucky School for the Blind
KSD	Kentucky School for the Deaf
LEA	Local Education Agency
MH	Multi-handicapped
MR/DD	Mental retardation/developmental disabilities

OEEC	Office of Education for Exceptional Children
OLPD	Office of Learning Program Development (KDE)
OSIS	Office of Special Instructional Services (KDE)
PFP	Personal Futures Planning Project
RCB	rehabilitation counselor for the blind
RCD	rehabilitation counselor for the deaf
SHIPP	Severe Handicaps: Integrated Preschool Programming
SPH	Severe Profoundly Handicapped
SPIN	Special Parents Involvement Network
STEPPS	Sequenced Transition to Education in the Public Schools
TASH	The Association of Severe Handicaps
TMH	Trainable Mentally Handicapped
TRACES	Teaching Research Assistance to Children & Youth Experiencing Sensory Impairments
UAP	University Affiliated Program
UK	University of Kentucky
VIPS	Visually Impaired Preschool Service

SECTION I
PROJECT GOALS AND OBJECTIVES

Project Goal

TO PROVIDE training and technical assistance to improve the quality of special education and related services in integrated environments, with programs designed to lead toward full community participation

- * TO families and service providers in Kentucky;
- * FOR individuals ages birth through twenty-one years who have dual sensory impairments;
- * SPECIAL EMPHASIS on individuals above and below mandatory school age.

Objectives and Activities

1.0 To identify needs and represent the interests of individuals with dual sensory impairments in Kentucky

  1.1 Kentucky-Deaf Blind Steering Committee

2.0 To provide local consultation to families and providers of all individuals on the VI-C Registry, with more intensive efforts for those above and below mandatory school age

  2.1 Local Consultation to Agencies and Families
  2.2 Parent Opportunities

3.0 To develop preservice and inservice training regarding dual sensory impairments as part of Kentucky's Comprehensive System of Personnel Development

  3.1 Seminar for TMH Faculty of State Universities
  3.2 Preservice Modules for Undergraduate TMH Coursework
  3.3 Participation in SPLASH Training for Teachers
  3.4 Inservice in the Support Document for Teachers

4.0 To implement training and services for young children under age 5, based on Kentucky's state plans under P.L. 99-457 (Parts B and H)

  4.1 Coordination of SHIPP Training for Current Providers
  4.2 Development of KPDS Services (unserved children)

5.0 To institutionalize coordination of transition through the ITP process and personal futures planning

  5.1 Transition Training for Schools and Adult Providers
  5.2 Coordination with HKNC representative and affiliate

SECTION II

ACCOMPLISHMENTS OF PROJECT
October 1, 1991 - September 30, 1992

This section of the Final Report will summarize the major accomplishments under each activity of the project. Detail is given to the project period from October 1, 1991 - September 30, 1992. Figure 1 lists all of the activities conducted by project staff during the grant period and how each activity relates to an objective in the proposal.

1.1 KENTUCKY DEAF-BLIND STEERING COMMITTEE

Description
The Kentucky Deaf-Blind Steering Committee is a state interagency advisory group which meets at least twice a year, with active subgroups on early childhood and transition. The committee was initiated in 1984.

Accomplishments

- Survey conducted in January, 1992 to poll Steering Committee members regarding their opinions about the effectiveness and operations of the Steering Committee.
- Full committee meetings in February and June, 1992. At the February meeting, committee members provided project staff with guidance regarding the development of the 622 proposal. Presented at the June meeting were awards for "Program of the Year" and "Contributor of the Year" in honor of Helen Keller week. Also at the June meeting, committee members were presented with the Governor's Proclamation of Helen Keller week, which was June 22-26. Ten members of the Steering Committee and two students with Dual Sensory Impairments attending the Formal Signing of this Proclamation.
- Two Transition Subcommittee meetings in February and June, 1992. The Transition subcommittee also serves as the Advisory Board for the Personal Future Planning Project and the Helen Keller Affiliateship. Efforts of this committee resulted in a Consumer Conference for persons with Usher's Syndrome which was held in April, 1992.
- One Early Childhood Subcommittee in September, 1992. The focus of the Early Childhood Subcommittee is to plan training for families of children birth through 2 years in transition to school programs.
- Needs and interests of children with Dual Sensory Impairments represented on state level advisory boards. Staff from DBIP are members of: State Advisory Board; ICC subcommittee; and Systems Change Advisory Board. As members, staff assure that children with Dual Sensory Impairments are considered in state planning efforts.

2.1 LOCAL CONSULTATION TO AGENCIES AND FAMILIES

Description
The project provides on-site consultation visits at school and/or home for children referred to or placed on the Deaf-blind Census. There is also a computerized tracking system. The activity has been ongoing since 1983.

Accomplishments

- 186 on-site consultation visits made between October 1, 1991 - September 30, 1992 on behalf of 62 students with dual sensory impairments (Note: Multiple Visits were made to some sites). This number of visits does not include those students who were served as a result of inservice training (see Activity 3.4)
  - Twenty of these children were Early Childhood (birth to five years)
  - Nineteen of these children were School-aged (5 years through fifteen years)
  - Seventeen of these children were Transition-aged (15 to 21 years)
  - The remaining six children were referrals

2.2 PARENT OPPORTUNITIES

Description

The project provides for parents to attend the Parent/Professional Conference and other seminars, plus occasional small group get-togethers. This activity has been ongoing since 1986.

Accomplishments

- Hilton Perkins Grant, initiated by Steering Committee, refunded to support and expand parent opportunities. Parent Group given name in Fall, 1992, Parents Confronting Dual Sensory Impairments.
- Two (2) Parent Advisory Board meetings (January and April) in conjunction with Hilton/Perkins Parent Project.
- Newsletter disseminated to all parents with children on the Deaf-blind Census in Fall, 1991; Spring, 1992, and Summer, 1992.
- Staff presentation (2) at Parent Professional Conference (March)
- parent attended Parent Professional Conference (March)
- Staff representation on KY SPIN (Kentucky Special Parent Involvement Network) governing board.
- One parent attended National Deaf-Blind Conference in Washington DC. (March) with assistance from TRACES.
- Parents invited to attend 1992 Summer Institute. Panel of five parents with children on the Deaf-blind Census presented at Summer Institute.
- Third Annual Family Forum for families of children with Deaf-blindness at Kavanaugh Life Enrichment Center, Crestwood, Kentucky. Ten families were represented with 38 family members in attendance. This activity was jointly sponsored by the Hilton/Perkins grant and Deaf-Blind Intervention Program (Parent travel paid for by KY SPIN). Parents developed Articles of Incorporation at this meeting for PCDSI. Three parents attended a meeting in New Orleans sponsored by the Helen Keller TAC Project. in September, 1992.

3.1 SEMINAR FOR TMH FACULTY OF STATE UNIVERSITIES

Description

The project conducts a seminar retreat on curriculum, adaptations and other issues regarding services for individuals with dual sensory impairments, for relevant faculty from institutes from across the state. This is an annual event since 1985.

Accomplishments

- Possible topics and meeting dates discussed at December Joint Staff meeting. Staff determined that the development of competencies for teachers of students with low incidence disabilities including Deaf-blindness. A survey was sent to faculty in December, 1992 to ascertain whether this would be a topic of discussion.
- Concurrently, the Kentucky Systems Change Project developed a subcommittee of their Advisory Board to address certification of teachers working with low

incidence populations. The State Coordinator was on this committee which met a minimum of six times throughout the grant year.

- Faculty Seminar conducted in May. Eight faculty from 5 colleges/universities were in attendance. In addition, five staff from DBIP and Systems Change attended the Seminar. Through a T.A. with TRACES, Bill Sharpton, University of New Orleans, facilitated the development of competencies.
- Resultant from the Faculty and Seminar and the IHE subcommittee of Systems Change was a list of competencies for teachers of children with low incidence disabilities as well as recommendations to the Kentucky Department of Education regarding certification. These certification recommendations are currently being considered by the Standards Board.

3.2 PRESERVICE MODULES FOR UNDERGRADUATE TMH COURSEWORK

Description

The project developed preservice modules on the nature and needs of individuals with dual sensory impairments, to be piloted in identified TMH courses at participating universities. The broad content and relationship to existing content in specific TMH undergraduate courses was developed under the previous project: 1987-89.

Accomplishments

- Modules were completed during the second year of the project: 1990-91. Staff have been available to guest lecture on the content of the modules.
- Module piloted six times at three colleges/universities: University of Kentucky; Eastern Kentucky University; and Sue Bennet College.
- Edited version disseminated nationally (see Dissemination sections)

3.3 PARTICIPATION IN SPLASH TRAINING FOR TEACHERS
(Strategies for Programming Longitudinally for all Severely Handicapped)

Description

The project staff teach topics in functional programming and integration for children with severe handicaps and Dual Sensory Impairments as part of a 10 day course taught for TMH and SPH teachers. The SPLASH training team is coordinated by the Systems Change Project. SPLASH was initiated in 1982; DBIP has participated since 1986.

Accomplishments

- Fall, 1991 semester completed with 27 teachers trained. Of the 27 teachers, 11(40%) were from school districts serving students with dual sensory impairments.
- One session by project staff which included a live demonstration of activity-oriented programming in an integrated group of children with severe disabilities and children without disabilities.
- One session by project staff on Integration.

SPLASH is conducted in the fall semester only with follow-up in the spring semester. DBIP staff are aware of teachers who have been through the training and report to the Systems Change staff, during monthly joint staff meetings, the level of training implementation conducted in classrooms where joint consultation occurs.

3.4 INSERVICE IN THE SUPPORT DOCUMENT FOR TEACHERS

Description

In fall, 1992, DBIP began a systematic approach to providing inservice training. Elements from the Support Document were listed on a needs assessment that was disseminated to all teachers and families with children on the Deaf-blind Census. The Support Document, developed under the 1987-89 cooperative agreement reflects the quality indicators listed under 2.1 Local Consultation. Inservice Training was provided to those who returned the Needs Assessment. Follow-up training was required in some circumstances.

Accomplishments

- Twenty-three inservice training conducted between October 1, 1992 and September 30, 1992.
- Inservices conducted on behalf of twenty-four children on the Deaf-blind Census. (Three Early Childhood; Seventeen School-aged; and three Transition-aged)
- Among the most frequently requested topics
  - Augmentative Communication
  - Integration
  - Implications for Students with Motor Disabilities (Positioning/Transferring)
  - Developing Activities Catalogs
  - Sign Language
  - Activity-oriented programming
  - Behavior
  - IEP Development
  - Functional Vision and Hearing Evaluations
  - Using Tactile Communication Systems
- Project staff also presented at sixteen (16) state and national conferences to teachers and service providers on content contained in the Support Document.

4.1 COORDINATION OF SHIPP TRAINING FOR CURRENT PROVIDERS
(Severe Handicaps: Integrated Preschool Programming)

Description

The project coordinates an intensive 10 day course (SHIPP) which is repeated each fall and spring semester for early childhood educators currently teaching young children with severe disabilities in Head Start, school districts, and Comprehensive Care and private affiliates. There is an accompanying one-day leaderships training workshop for administrators of those educators. SHIPP was initiated in 1988. Content reflects quality indicators listed under Activity 2.1 Local Consultation, with specific application for children under 5.

Accomplishments

- Fall 1991 and Spring 1992 semesters completed with teachers (10 days) and administrators (one day).
- Five follow-up consultations conducted.
- SHIPP trainer meeting (July)

Like SPLASH (Activity 3.3), a portion () of all SHIPP participants serve children with dual sensory impairments among other infants, toddlers, and preschool children. SHIPP also serves as an important Child Find network for the Deaf-blind Census.

4.2 DEVELOPMENT OF KPDS SERVICES (unserved children)
(Kentucky System of Parent Development)

Description
Project staff provide assistance to the PL 99-457 lead agencies, Office of Education for Special Learner Needs and Cabinet for Human Resources, in expanding direct in-home service to families of young children with hearing impairments (SKI*HI) model to include children with severe and multiple handicaps, including dual sensory impairments.

- Project staff provided technical assistance to PREVIEW, an outgrowth of this group to develop a transdisciplinary , functional assessment model for children with vision impairments, including some children with multiple disabilities.
- Inservice Training in June for seven PREVIEW staff in functional assessment.

The KDPS model was never formalized in Kentucky. DBIP staff provided support to efforts such as PREVIEW, which follows a similar training model as SKI*HI for training parents. This activity was dropped from the 1992-95 Cooperative Agreement. DBIP remains, however, actively involved in state Early Childhood Initiatives. The Early Childhood Consultant is on an AdHoc Committee of the State Advisory Panel and the State Director is on a subcommittee of the ICC. In addition, the Early Childhood Consultant has been instrumental in developing PRAISE (Preschool Resource Available for Special Education) for Head Start in Kentucky. This training includes specific information about children with Deaf-blindness.

5.1 TRANSITION TRAINING FOR SCHOOL AND ADULT PROVIDERS

Description
The project will provide local mentoring and a training workshop for families and local providers in ITPs (Individual Transition Plans) and Personal Futures Planning.

Accomplishments
- Informal training on ITPs occurring during 53 consultation visits on behalf of youth with Dual Sensory Impairments.
- DBIP staff involved with 18 students participating in Personal Futures Planning Project. Attend all related meetings.
- Personal Futures Planning Conference in May - Presentation by project staff.
- Consumer Conference in April for persons with Usher's Syndrome. Six Consumers in attendance. Transition issues discussed. This event co-sponsored by: DBIP, TRACES, Developmental Disabilities Planning Council, Personal Futures Planning Project, and Helen Keller Affiliateship.
- Two Consumer Group meetings in July and August

The Kentucky Department of Education has conducted training for all Special Education personnel in the development of ITPs. While DBIP is no longer supporting separate training, the development of the Consumer Support Group is supported by DBIP due to the fact that Transition-aged individuals may participate and gain useful information regarding transition issues. Also, DBIP is actively involved with the Personal Futures Plans of Transition-aged individual who participate with PFP. This process interfaces with the ITP process.

5.2 COORDINATION WITH HKNC REPRESENTATIVE AND AFFILIATE

Description

Project staff conduct joint client visits approximately 2-4 times per year with the Helen Keller representative in from Atlanta. More frequent joint consultations are conducted between project staff and the Kentucky Helen Keller Affiliate.

Accomplishments

- Two joint visits with Helen Keller Regional Representative in January and September
- Five joint visits with Kentucky Helen Keller Affiliate on behalf of clients on Deaf-blind Census
- Transition Coordinator visited Helen Keller National Center in Sands Point, New York to investigate services. This activity was supported by the Department of Vocational Rehabilitation.
- Helen Keller Regional Representative attended Consumer Conference (April)

Figure 1

Kentucky Deaf Blind Intervention Program

October 1, 1989 - September 30, 1992

Calendar of Events

Date	Objective	Description
October 1, 1991 - September 30, 1992		
October 1	3.2	Lecture on Dual Sensory Impairments for EDS 517
October 4	3.0	Staff Meeting to Review Needs Assessments
October 9	4.1	SHIPP Administrators Training
October 9-11	1.0	State Advisory Board Panel
October 10	1.0	Systems Change Advisory Board Meeting
October 11	1.0	Staff meeting
October 12	1.0	Presentation for Kentucky Association for Children Under Six
October 16	3.3	Presentation for SPLASH
October 18	3.3	Presentation for SPLASH
October 22-25	4.1	SHIPP Training - Module II
November 1	1.0	Presentation for Early Childhood Conference
November 8	1.0	Joint Staff Meeting
November 9	1.0	Presentation for Bluegrass Chapter of Council for Exceptional Children
November 11	2.2	KY SPIN Board Meeting
November 16-19	1.0	Project Director's Meeting, Washington DC.
November 19-22	4.1	SHIPP Training - Module III
November 25-26	1.0	Kentucky Department of Education Special Education Conference- Presentation
November 26	3.2	Guest Lecture - EDS 620 - University of Kentucky

December 2	1.0	Presentation for Kentucky Department of Education Exceptional Child Services
December 4	1.0	Joint Staff Meeting
December 10	4.1	Follow-up for SHIPP - Child Development Center Lexington, KY
December 17	4.1	Follow-up for SHIPP - Henry County
January 7	4.1	Follow-up for SHIPP - Henry County
January 14-16	5.2	Visit to Helen Keller National Center by Transition Consultant
January 17	2.2	KY SPIN Board Meeting
January 21	4.1	Follow-up for SHIPP - Henry County
January 22-24	4.2	SHIPP Training - Module 1
January 21-22	5.2	Instate Consultations with Helen Keller Regional Representative and KY Helen Keller Affiliate
January 25	2.2	Parent Advisory Board Meeting
January 28	3.0	Institutes of Higher Education Subcommittee Systems Change Advisory Board
January 29	3.0	Integrated Therapy Workshop
February 12	1.1	Steering Committee Meeting
February 12	5.2	Joint Visit with Helen Keller Affiliate
February 5	1.0	Joint Staff Meeting
February 12	1.1	Transition Subcommittee Kentucky Deaf-Blind Steering Committee
February 13	4.0	Interagency Coordinating Council Meeting
February 14	3.2	Guest Lecture - Eastern Kentucky University
February 18	4.0	IFSP/Transition Subcommittee Meeting Interagency Coordinating Council
February 19	4.1	SHIPP Administrator's Training
February 20	4.0	Preschool Training Conference, Lexington Presentation
February 22	4.2	Presentation for Project Lexington

February 25-28	4.1	SHIPP - Module II
February 28	4.0	Presentation for Early Childhood Conference
March 4	1.0	Systems Change Advisory Board Meeting
March 13	2.2	KY SPIN Board Meeting
March 14-15	2.2	Presentation for Parent Professional Conference
March 16	1.0	Joint Staff Meeting
March 21-24	1.0	National Deaf-Blind Conference Three Presentations by DBIP Staff
March 25-27	4.1	SHIPP Training - Module III
March 27	3.0	Presentation for KY Council for Exceptional Children Conference
March 30- April 3	4.0	PRAISE Training for Head Start
April 3	1.0	Inservice for Preschool Teachers, Bullitt Co.
April 13	4.2	Meeting with PREVIEW staff to plan Inservice
April 14-15	4.1	Follow-up for SHIPP
April 14	3.2	Lecture on Dual Sensory Impairments for Social Work Class, University of Kentucky
April 14	4.0	IFSP/Transition Subcommittee Meeting Interagency Coordinating Council
April 17	1.0	VIPS Training, Frankfort
April 17	4.0	Early Childhood Conference - Presentation
April 21-22	1.0	Personal Futures Planning Conference Presentation by Project Staff on DSI
April 20-24	4.0	PRAISE Training - Headstart
April 24-25	5.2	Consumer Conference for Persons with Usher's Syndrome
April 25	2.2	Parent Advisory Board Meeting
April 29	3.0	Institutes of Higher Education Subcommittee Kentucky Systems Change Advisory Board

April 30	3.2	Lecture for Class at Sue Bennet College London, KY
May 6	1.0	Joint Staff Meeting
May 12-13	3.1	Faculty Seminar
May 12	4.1	Follow-up for SHIPP - Henry Co.
May 18	2.2	TAPP Meeting (Technical Assistance to Parents) Presentation
May 20	5.0	Personal Futures Planning Meeting
June 1	1.1	Ad Hoc Subcommittee Meeting Kentucky Deaf-Blind Steering Committee
June 4-5	1.0	Conference "Supporting People in Inclusive Environments"
June 5	4.0	Presentation on DBIP for State-wide Preschool Interagency Planning Council
June 9-10	1.0	Regional Training Center Early Childhood Conference- Presentation
June 11	4.2	Inservice for PREVIEW Assessment Team
June 10, 15, 17,22,	4.0	Disabled Citizens Computer Center Summer Computer Program
June 11	1.1	Signing of Governor's Proclamation of Helen Keller Awareness Week
June 16	3.0	Institutes of Higher Education Subcommittee Kentucky Systems Change Advisory Board
June 19	1.0	Joint Staff Meeting
June 24	3.2	Lecture In Special Education and Law Class University of Kentucky
June 25	1.1	Kentucky Deaf-Blind Steering Committee Meeting
June 26	1.0	State Advisory Board Panel
July 6-7	4.0	Meeting on Alternative Portfolio Development
July 13-17	3.4	Summer Institute
July 22	1.0	Kentucky Systems Change Advisory Board Meeting
July 23	4.1	SHIPP Trainer Meeting

July 25	5.2	Consumer Group Meeting
August 3	1.0	Joint Staff Meeting
August 11	4.0	Meeting on Alternative Portfolio Development
August 14-16	2.2	Family Forum
August 16	5.2	Consumer Group Meeting
August 31-September 4	4.0	PRAISE Training - Head Start
September 14	4.0	Bluegrass Conference, Lexington
September 17-18	1.0	KY TASH Conference
September 22	1.1	Early Childhood Subcommittee Meeting Deaf-Blind Steering Committee
September 23-25	4.1 2.2	SHIPP Training - Module I One Parent Attending
September 26	1.0	Consumer Support Conference, Cincinnati, OH
September 26	4.0	Alternative Portfolio Board Meeting
September 30	3.2	Guest Lecture - Eastern Kentucky University

SECTION III
OUTCOMES

This section of the Final Report will be divided into a number of Subsections. In the first, figures will be shown that coincide with the above activities. These will show impact data from the various objectives. The second Subsection will be a narrative of some child-specific outcomes for at least one child on the each Consultant's caseload (including the State Director). The last Subsection will be on : Problems; Solutions and Additional Needs of the project and the children served by the project.

IMPACT DATA:

On the following pages are a number of figures that show the impact of specific project activities. For most activities, a map of Kentucky shows the home location of participants or students. When training was conducted, evaluation data is included. (Please Note that evaluation data is not available for every inservice conducted by the project.)

Following are the Figure Numbers and the corresponding activity as it relates to project objectives:

FIGURE	ACTIVITY	CORRESPONDING OBJECTIVE	
Figure #2	Steering Committee Survey	Deaf-Blind Steering Committee	(1.1)
Figure #3	Consultation Provided Data	Local Consultation	(2.1)
Figure #4	Family Forum Data	Parent Opportunities	(2.2)
Figure #5	Faculty Seminar Data Seminar for TMH Faculty		(3.1)
Figure #6	Inservice Data	Inservice:Support Document	(3.4)
Figure #7	SHIPP Data	Coordination of SHIPP	(4.1)
Figure #8	Consumer Conference Data	Transition Training	(5.1)

Figure 2
1992 Data
Kentucky Steering Committee Survey

In Spring 1992, all members of the Kentucky Deaf-Blind Steering Committee were polled anonymously regarding their opinions about the effectiveness and the operations of the Steering Committee.

Respondents

Fifteen members of the committee responded to the survey (60%). Of those that responded, seven (highest response) had been on the committee for more than two years (47%) and had attended three or more meetings (73%). Over half (53%) of the respondants had also participated in one or more of the committee's various planning subgroups.

Role of the Committee

Members were asked to rate past and potential functions of the committee on a scale of 1 (highly important role) to 4 (not a role). Although all functions were rated important, the priority areas the committee wanted to address involved the following:

#1	advocating for specific services for deaf-blind	82%
#2	assuring coordination with other agencies/projects in the state	82%
#3	identifying needed services for deaf-blind	82%

Organization and Structure

1. A majority of the members (80%) felt that 2 meetings a years were sufficient.

2. Of those who had a preference, 46% preferred altering locations of the meetings.

3. For the most part, the committee did not desire more formal structure, although 67% felt that an orientation for new members was needed.

4. Members generally wished to keep a similar format for meetings, the student of the year should be modified.

	Keep	Modify	Discontinue
- meeting notice with summary	10	3	
- follow-up mailing with minute	11	2	
- review of last meeting	11	2	1
- length of meeting	13		
- type of input	11	1	
- student/contributor of year	10	3	

5. The following persons were nominated to the committee
- Sharon Cole, Parent of child with dual sensory impairments
- Prudence Moore, Developmental Disabilities Council
- Pat Murphy, Teacher of students with dual sensory impairments
- Sharon Bensinger, Visually Impaired Preschool Services

Past Performance of Committee

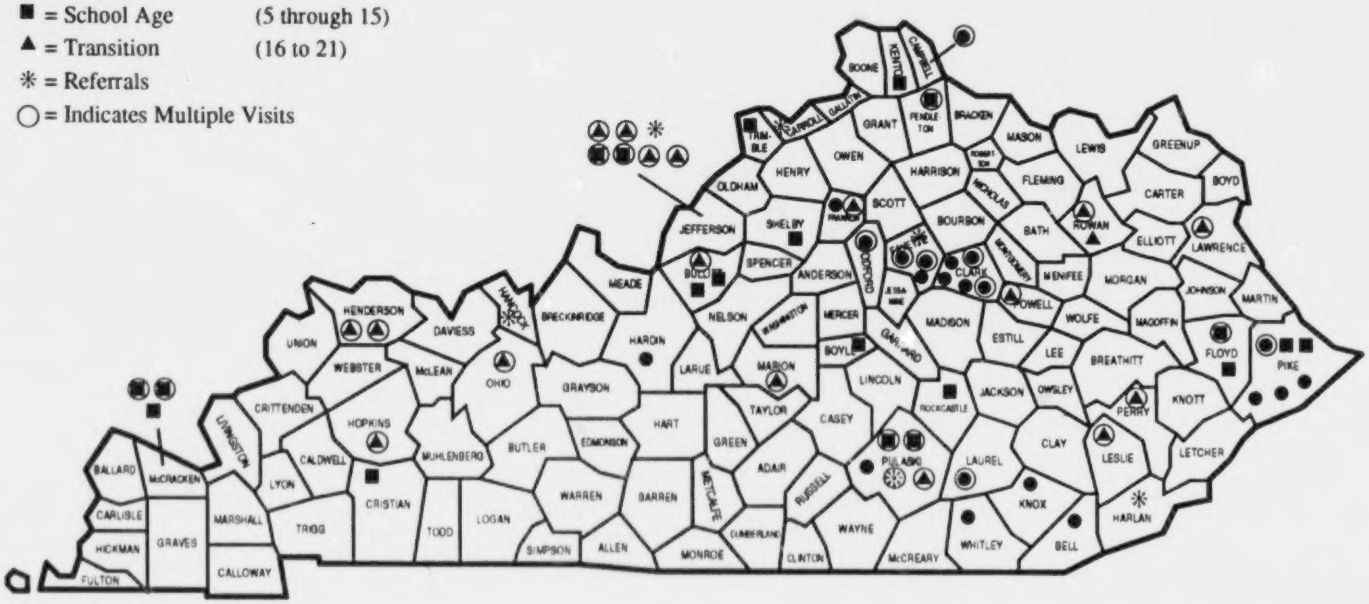
Members were asked to evaluate how well the committee was functioning by rating descriptors on a scale of 1 (high) to 5 (low). Overall, the committee performance was rated highly.

#1	Effectiveness	(mean = 1.3)
#2	Relevance	1.4
#3	Organization	1.4
#4	Informativeness	1.2
#5	Productivity	1.5
#6	Goal-directedness	1.5

Consultation Provided
Activity 2.1
Figure 3

Children and Youth
The Kentucky Deaf-Blind Census
9-30-92

● = Early Childhood (0 to 5)
■ = School Age (5 through 15)
▲ = Transition (16 to 21)
✳ = Referrals
○ = Indicates Multiple Visits



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CLINTON
McCREARY
WHITLEY
FULTON
CALLOWAY

Figure 4

FAMILY FORM Evaluation Scale

Workshop: 3rd Annual Family Forum Date: August 14-16, 1992

On a scale from 7 (high) to 1 (low) the participants rated the session as:

N-13

		Range	Average
1.	The **organization** of the workshop was:	5-7	6.7
2.	The **objectives** of the workshop were:	4-7	6.0
3.	The **work** of the consultant(s) was:	4-7	6.6
4.	The **ideas and activities** were:	6-7	6.7
5.	The **scope (coverage)** was:	4-7	6.3
6.	My **attendance** at this workshop should prove	6-7	6.9
7.	Overall, I consider this workshop:	6-7	6.8
8.	Do you feel a need for additional information about this topic?	YES - 6	NO - 4

What other topic(s) would you like information about?

- anything is o.k. for me.
- this topic is a never ending information!
- Parental Rights.
- "Estate Planning for the Disabled". Please contact E.P.D. of KY in Georgetown, KY, Bob Daughtery.
- Community Based Program's
- How to be a more assertive parent, talk out, I lack in this area - speak up more. How do you keep husband or father involved?

I liked the workshop because:

- You find out things you may not have known. Meet and feel what needs other people have and what they are going throw.
- it gave our family a chance to get away and learn to deal with taking care of our little "Josh".
- those present were able to share concerns. We were able to form the structure for the Parent group.
- gives us ideas about how to work with our child, resources, where to go for help.
- I had a chance to meet more parents and interact with them.
- Very informative, variety of different areas that deal with education. The whole family was able to come.

- it was very informative, but as well the whole family got to come, and was able to enjoy themselves.
- Sharing ones burdens with the rest of the group.
- There was a lot of great information that I needed, and learn by. It helped me to see that parents are a big part of the childrens life's. There are other families you may be able to help with information.

I wish that:

- Whitney could wake up one day and tell me what all different things she could see and ask what they mean and do.
- we had learned about this group earlier. Everyone was great!
- we could get more parents to participate.
- I could become more active in advocacy and lobbying for our and our children's rights. I am not a good public speaker so I don't know how much help I can be.

GENERAL COMMENTS:

- work out transportation.
- Jennifer and "company" keep up the good work!
- Thanks
- need more variety in food served.
- I wish there was someway the Family Forum could be longer than a weekend.
- I really had a great time.
- I really enjoyed the whole weekend.
- The workshop was great, I got a lot out of it. Learned a lot. Stef had a bundle of joy.

FAMILIES IN ATTENDANCE

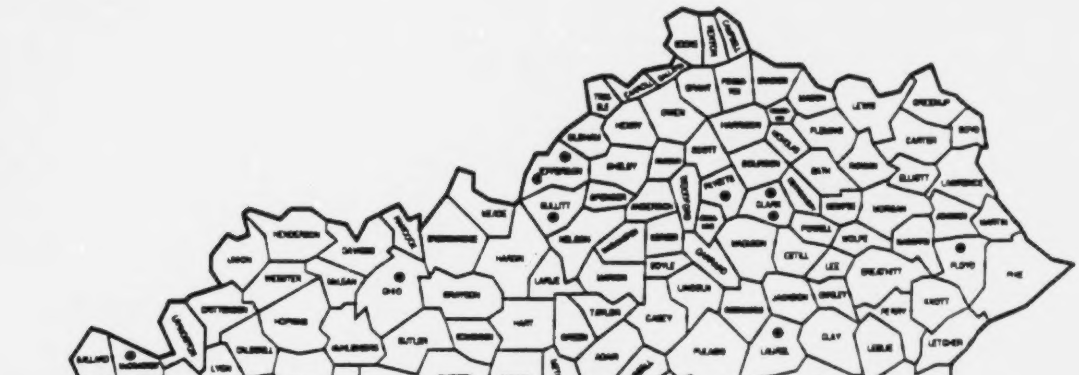


Figure 5

Faculty Evaluation Scale

N = 10

Workshop: Faculty Workshop Date: May 12-13, 1992

On a scale from 7 (high) to 1 (low) the participants rated the session as:

		Range	Mean
1.	The **organization** of the workshop was	6-7	6.5
2.	The **objectives** of the workshop were:	3-7	6.1
3.	The work of the **consultant(s)** was:	4-7	6.3
4.	The **ideas and activities** were:	5-7	6.4
5.	The **scope** (coverage) was:	5-7	6.3
6.	My **attendance** at this workshop should prove	5-7	6.4
7.	Overall, I consider this workshop:	6-7	6.5

8. Do you feel a need for **additional information** about this topic? **5 YES** **3 NO**

9. **What other topic(s) would you like information about?**

- How "consumers" can be given the opportunity to be on the board of the Higher Education committee.

10. **I liked the workshop because:**

- Well managed.
- Competencies were discussed and elaborated.
- IHE Directors, J. L., S.B. & J. W. do value individual differences of all people and do value people which come from different backgrounds.
- Very targeted/alot accomplished.
- Opportunity for participation.
- Product oriented.

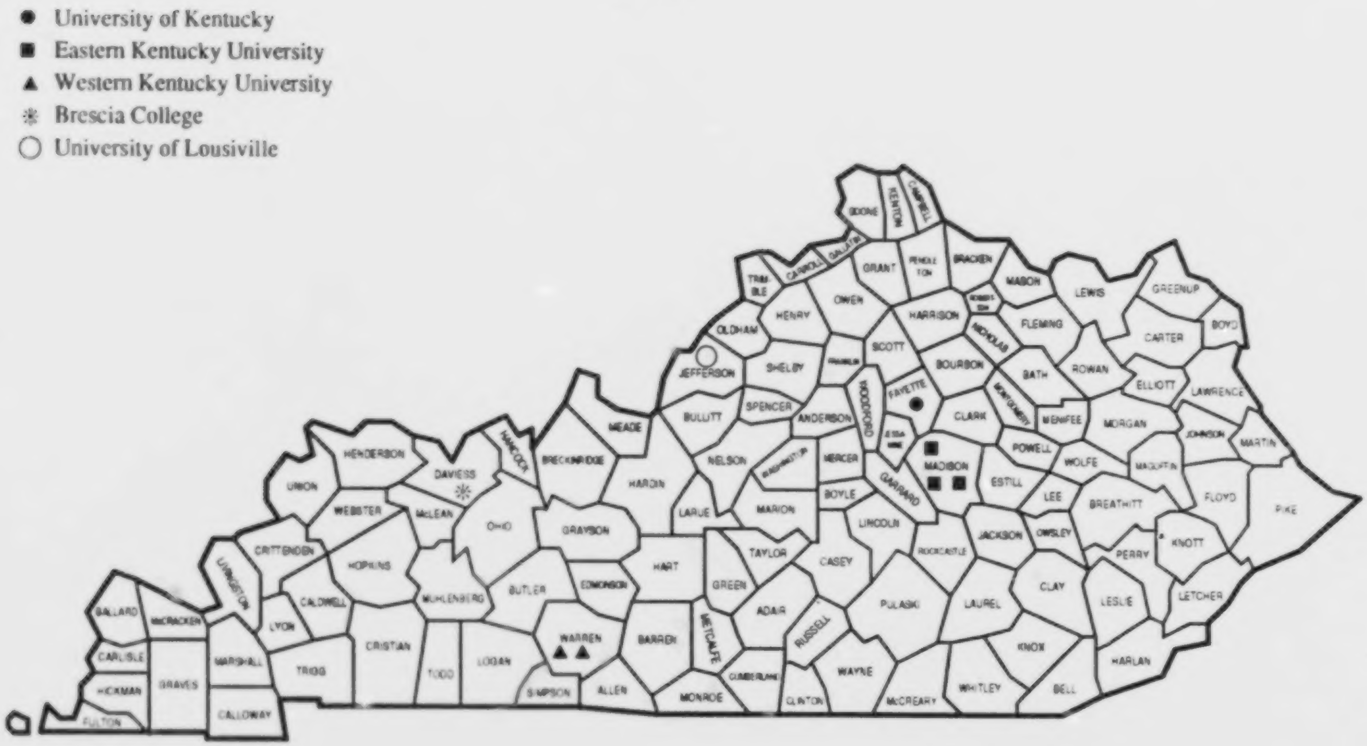
11. **I wish that**

- If I had known "ahead"of time that being placed in a group of three with Bill Berdine, who appears to have no diplomacy for collaborating with a person with a different background or opinion, would not be mutually beneficial to either him or me. Obviously MUCH needs to be done to teach appreciation of human differences to all even Special Education Department Chairpersons, before true collaboration can occur.
- More time.
- More structure had been provided.
- The meeting was directed toward originally stated sub-committee goals. Deaf Blind staff and "other" members not well enough informed regarding Preservice to contribute meaning fully

12. **General Comments:**

- Tremendous amount done.
- Production, good useful sessions.
- You did a good job at a very complex frustrating task.

Figure 5



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▲ Western Kentucky University
✻ Brescia College
○ University of Lousiville
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Inservice Training
Activity 3.4
Figure 6

On behalf of:

● = Early Childhood (0 to 5)
■ = School Age (5 through 15)
▲ = Transition (16 to 21)
✳ = Referrals
○ = Indicates follow-up training

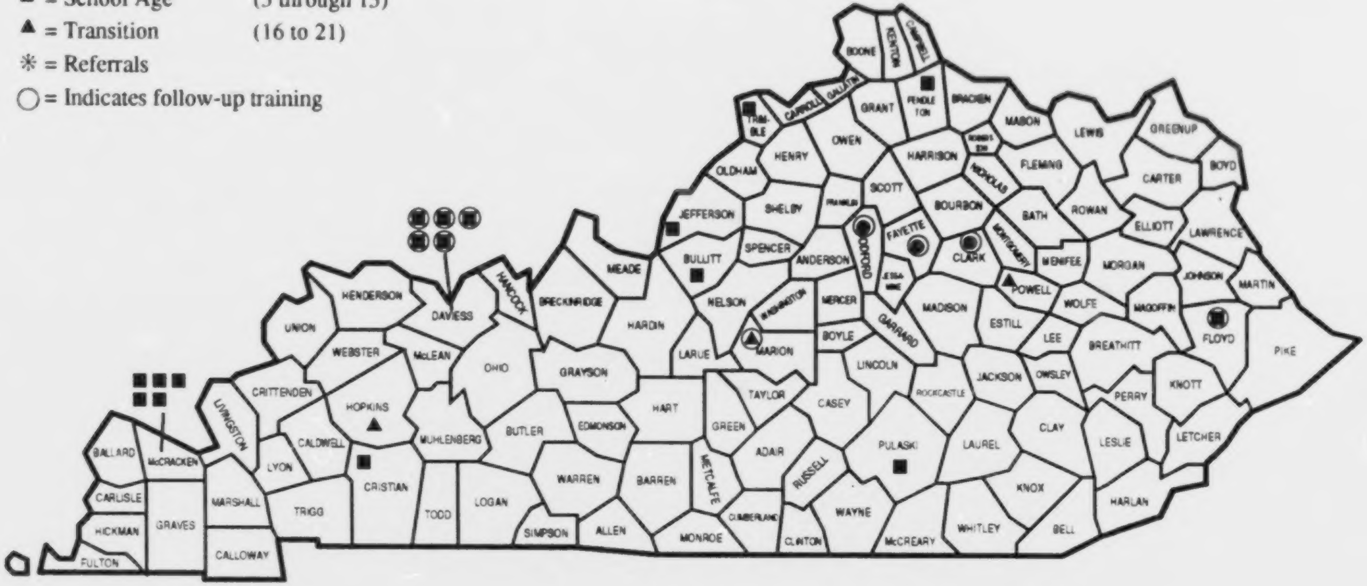
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Figure 6

DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 5/20/92

Topic: Augmentative Communication

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 5 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	7	7.0
2. The objectives of the workshop were:	7	7.0
3. The work of the consultant(s) was:	7	7.0
4. The ideas and activities were:	7	7.0
5. The scope (coverage) was:	7	7.0
6. My attendance at this workshop should prove:	7	7.0
7. Overall, I consider this workshop:	7	7.0

	Yes	No
8. Do you feel a need for additional information about this topic?	4	1

9. Other topic(s) requested:

- More on adaptive equipment
- Switches and communication boards
- Feeding/things to look at in terms of referring a child for an O.T. evaluation

DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 2/12/92

Topic: Integration

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 9 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	7	7.0
2. The objectives of the workshop were:	7	7.0
3. The work of the consultant(s) was:	7	7.0
4. The ideas and activities were:	7	7.0
5. The scope (coverage) was:	4-7	6.3
6. My attendance at this workshop should prove:	7	7.0
7. Overall, I consider this workshop:	7	7.0
	Yes	No
8. Do you feel a need for additional information about this topic?	5	0

9. Other topic(s) requested:
   - Activities to use with students (2)

10. I liked the workshop because:
    - It helped me to understand more about what to do with children who come into my class
    - I will be involved next year
    - I feel I understand the purpose of integration better after attending the workshop
    - It will prove beneficial
    - It opened our eyes to several interesting ways to benefit not only Stephanie but all students who need help
    - Pleasant atmosphere!

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DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 2/11/92

Topic: Motor-Positioning & Transfer

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 6 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	6-7	6.8
2. The objectives of the workshop were:	7	7.0
3. The work of the consultant(s) was:	6-7	6.8
4. The ideas and activities were:	6-7	6.8
5. The scope (coverage) was:	6-7	6.8
6. My attendance at this workshop should prove:	6-7	6.8
7. Overall, I consider this workshop:	6-7	6.8
	Yes	**No**
8. Do you feel a need for additional information about this topic?	1	1

9. Other topic(s) requested:

10. I liked the workshop because:
    - Provided specific ideas for motor/switch use and placement
    - It was geared specifically for particular student
    - It was helpful for Ryan
    - I received more information about types of switches and placements
    - The ideas/suggestions are practical and interesting

11. I wish that:
    - We had had this a year ago
    - The mother would have attended

12. General comments:
    - Nice display of manipulatives for students
    - Both presenters are very knowledgable and take time to explain all details of the activities

DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 3/4/92 Topic: Developing Activities Catalog

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 4 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	3-7	4.3
2. The objectives of the workshop were:	4-7	4.8
3. The work of the consultant(s) was:	4-7	4.8
4. The ideas and activities were:	3-7	4.8
5. The scope (coverage) was:	3-4	3.7
6. My attendance at this workshop should prove:	3-7	4.3
7. Overall, I consider this workshop:	4-7	4.8

	Yes	No
8. Do you feel a need for additional information about this topic?	0	3

9. Other topic(s) requested:

10. I liked the workshop because:
    - I understood more the difference between skills and activities
    - It helped me to beter understand the project

11. I wish that:

12. General comments:

DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 2/26/92

Topic: Sign-language

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 21 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	5-7	6.8
2. The objectives of the workshop were:	5-7	6.8
3. The work of the consultant(s) was:	6-7	6.9
4. The ideas and activities were:	5-7	6.8
5. The scope (coverage) was:	5-7	6.6
6. My attendance at this workshop should prove:	5-7	6.8
7. Overall, I consider this workshop:	5-7	6.9

	Yes	No
8. Do you feel a need for additional information about this topic?	18	2

9. Other topic(s) requested:
   - Forming sentences and learning the alphabet (2)
   - Physical therapy
   - More signing (5)
   - How to teach sign language
   - Helping disabled children
   - Expanding my vocabulary
   - Follow-up to this workshop

10. I liked the workshop because:
    - It taught me basic signs I need to know while working with the blind
    - It was interesting and fun to learn a different way of communi-

DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 12/2/91

Topic: Activity-Oriented/Behavior

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 11 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	5-7	6.1
2. The objectives of the workshop were:	6-7	6.7
3. The work of the consultant(s) was:	5-7	6.4
4. The ideas and activities were:	5-7	6.4
5. The scope (coverage) was:	5-7	6.3
6. My attendance at this workshop should prove:	3-7	5.8
7. Overall, I consider this workshop:	5-7	6.4

	Yes	No
8. Do you feel a need for additional information about this topic?	4	2

9. Other topic(s) requested:

   - Sign-language (2)
   - Materials

10. I liked the workshop because:

    - It was positive and geared to our children
    - It was involved with what I'm doing
    - It got our staff excited and working together
    - It will help me with my students. Perhaps I will find many of the ideas beneficial.
    - It was very informative

DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 2/13/92

Topic: Augmentative Communication

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 5 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	7	7.0
2. The objectives of the workshop were:	7	7.0
3. The work of the consultant(s) was:	7	7.0
4. The ideas and activities were:	7	7.0
5. The scope (coverage) was:	6-7	6.6
6. My attendance at this workshop should prove:	6-7	6.8
7. Overall, I consider this workshop:	6-7	6.8

	Yes	No
8. Do you feel a need for additional information about this topic?	5	

9. Other topic(s) requested:
   - Activity-based curriculum and daily activities

10. I liked the workshop because:
    - Showed variety of switches; showed other activities such as twirling paint; stressed importance of changing messages (on tape loop messages) frequently to match activities
    - It showed me a lot of ways to let Steve tell us what he wants and allow him to be more independent
    - It gave me some insight into the various activities I need to work with my student.

11. I wish that:
    - We were able to have a longer workshop
    - I knew more

12. General comments:
    - Excellent workshop - provided much information
    - Very useful information; will be very helpful

DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 3/6/92

Topic: Activity-Oriented/IEP Dev.

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 14 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	6-7	6.7
2. The objectives of the workshop were:	5-7	6.6
3. The work of the consultant(s) was:	6-7	6.7
4. The ideas and activities were:	5-7	6.4
5. The scope (coverage) was:	5-7	6.3
6. My attendance at this workshop should prove:	5-7	6.4
7. Overall, I consider this workshop:	6-7	6.6

	Yes	No
8. Do you feel a need for additional information about this topic?	5	7

9. Other topic(s) requested:
   - Data-collection (2)
   - Time management in the classroom
   - Follow-up to this

10. I liked the workshop because:
   - It answered questions that I was confused, frustrated with when it came to assessment for students in my room
   - It made me more aware of activities
   - Presenters appeared to have experience in doing the actual programming and IEP development. Concrete examples were given.
   - In-depth coverage and explanation
   - The speakers were excellent - they really kept you involved

DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 8/13/92 Topic: Integration

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 7 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	6-7	6.8
2. The objectives of the workshop were:	6-7	6.8
3. The work of the consultant(s) was:	6-7	6.8
4. The ideas and activities were:	6-7	6.8
5. The scope (coverage) was:	6-7	6.6
6. My attendance at this workshop should prove:	6-7	6.3
7. Overall, I consider this workshop:	6-7	6.4

	Yes	No
8. Do you feel a need for additional information about this topic?	7	

9. Other topic(s) requested:
   - The practical stuff - I want to see it work and see how feeding, toileting, PT and all fits in regular education
   - Possible future training after implementing and evaluating our intervention program

10. I liked the workshop because:
    - The presenter was organized and upbeat - really non-judgmental considering her advanced state of integration. I also like the topic
    - It helped dispel anxiety
    - Materials in the folder were organized to make it easier to follow the workshop

DEAF/BLIND INTERVENTION PROGRAM

In-Service Training

Evaluation Data

Date: 5/1/92

Topic: Functional Vision/Touch Cues

Evaluation Criteria

On a scale of 1 (low) to 7 (high), the 7 participants rated the session as:

	Range	Average
1. The organization of the workshop was:	5-7	6.6
2. The objectives of the workshop were:	6-7	6.7
3. The work of the consultant(s) was:	7	7.0
4. The ideas and activities were:	7	7.0
5. The scope (coverage) was:	4-7	6.1
6. My attendance at this workshop should prove:	6-7	6.7
7. Overall, I consider this workshop:	6-7	6.9
	Yes	**No**
8. Do you feel a need for additional information about this topic?	4	1

9. Other topic(s) requested:
   - More in-depth of the same; communication ideas
   - More detailed on methods/activities to "teach" CVI students
   - Hearing impairment; how to "read" the responses of SPH children

10. I liked the workshop because:
    - It gave me more information about Josh's disability
    - It provided information on a topic I knew little about
    - It gave a good overview and basic techniques for working with deaf-blind
    - I learned to start re-thinking more of the visual cues associated with music, rather than just the aural ones
    - I needed the awareness to the needs of the special children

Figure 7

SHIPP - Fall 1991 and Spring 1992
Activity 4.1

CONTENT

10 days of inservice training (3 semester hours) with practicum

Utilization of Strategies = activity catalogue, embedded skills, cueing, integration, partial participation.

FALL, 1991

For each teacher trained: (N = 35)

21.6 children affected
3.5 others trained locally
5.6 others received recommendations to use strategies

SPRING, 1992

For each teacher trained: (N = 39)

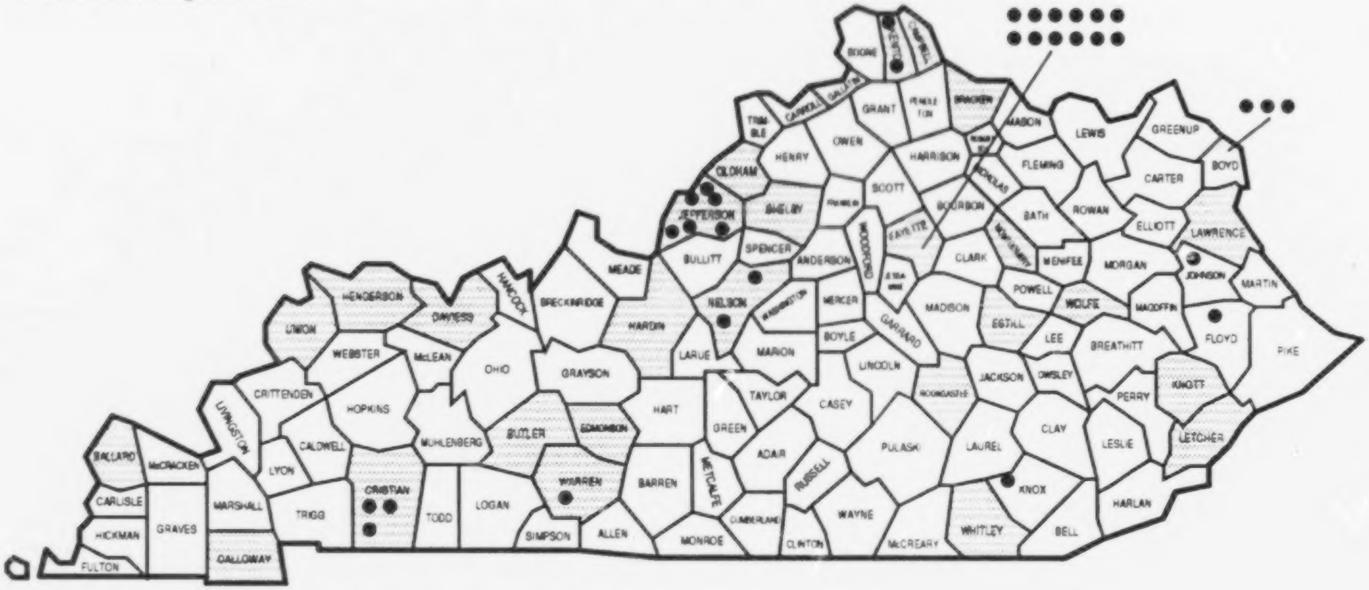
15.1 children affected
2.2 others trained locally
4.0 others receiving recommendation to use strategies

Figure 7
SHIPP - Fall 1991 & Spring 1992

● = Infant/Toddler

▨ = School Districts

N- 74
35 (47.2%) serving deaf-blind.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CRITTENDEN
HOPKINS
TAYLOR
CASEY
ROCKCASTLE
LIVINGSTON
CALDWELL
MUHLENBERG
BUTLER
EDMONSON
HART
GREEN
ADAIR
PULASKI
LAUREL
CLAY
LESLIE
LETCHER
BALLARD
McCRACKEN
LYON
CHRISTIAN
WARREN
BARREN
METCALFE
RUSSELL
KNOX
HARLAN
CARLISLE
MARSHALL
TRIGG
TODD
LOGAN
CUMBERLAND
WAYNE
HICKMAN
GRAVES
SIMPSON
ALLEN
MONROE
CLINTON
McCREARY
WHITLEY
BELL
FULTON
CALLOWAY

Figure 8

Consumer Conference
April 24-26, 1992
Evaluation Results

N = 6

1. Did the training meet your expectations?
   Exceeded expectations = 83.3%
   Satisfactorily met = 16.6%
   Somewhat met -
   Not met -

2. Were the speakers well prepared, informative and understanding of your needs?
   Yes = 100%

3. Has your knowledge of Usher's Syndrome increased because of this workshop?
   Yes = 100%

4. What is your reaction to the information you receive at this workshop
   I will share this information with others = 83.3%
   This is good information to know = 16.6%
   I will never use this information -

5. Do you think this information will help you in the future?
   Yes = 100%

6. Was this session:
   Too advanced -
   About right = 83.3%
   Too elementary -

Comments:

- I was glad they invited me to this meeting. I learned a lot about R.P. I would like to help in the future to share this information
- It is good to share with other people with Usher's Syndrome at this workshop because of knowledge.
- Thought Saturday was very informative, but may have been to verbal. Maybe have a deaf-blind person speak, followed by an eye doctor so participants can discuss and compare. Colored pencils - use dark colors
- I want to hear more about Art Roehrig. Others who have R.P. and U.S. Enjoyed ice cream party. I want other workshops.
- I am happy that and I want interested. I like Art talking about his experiences.
- I like it, very interesting. I am glad you all had other people there besides just me.

CHILD SPECIFIC DATA

In this section vignettes about specific students served by DBIP provided. Each consultant has described one student they have worked with during the grant period. The purpose is to demonstrate the impact of the project on the students it serves. For each student, the type of involvement by DBIP will be described as well as positive outcomes for the student. The child's age and a brief description of the student's disabilities will be provided. The student's name and other identifying information has been omitted.

I. EARLY CHILDHOOD CONSULTANT

Leslie lives with her grandparents and other extended family members in a rural area of Kentucky. She is seven years old, Leslie has multiple disabilities including severe cerebral palsy, severe mental retardation, dual sensory impairments and complex health care needs.

This past year Leslie transitioned from an early intervention center-based program which she attended two days a week, to a classroom based program within the local school district. She attended the program five days a week for half day sessions Initially the school district was reluctant to serve Leslie in a school based program. They preferred to serve her on home instruction as they felt that her needs were to multiple and complex to the be served at school. In addition, they were having difficulties understanding how to develop and implement a program for Leslie which would be educationally relevant. She had been described by previous programs as "non-communicative, extremely limited abilities and multiply complex".

During this past year I have made an average of 1.5 visits per month to her home and/or classroom. I have facilitated monthly Personal Futures Planning meetings with Leslie, her family, friends and school service providers. I have made on-site consultation visits to provide technical assistance in the form of in-services, modeling of teaching strategies, development and implementation of adaptations to facilitate her participation in age-appropriate activities, identification of local resources and facilitation of the development of a transdisciplinary service delivery system (including medical personnel), the assisting of further training for school personnel and the development of an activity-oriented I.E.P.

As a result Leslie is now attending school five days a week for full day sessions. She has been placed in a classroom for students with multiple disabilities with a full-time aide. She is integrated into regular education classrooms to participate in activities with her age-appropriate peers for at least 50% of the day. Leslie is utilizing automated learning devices across a variety of environments as well as augmented communication systems.

All in-service and formal trainings have been attended by all members of her transdisciplinary team.

II. CURRICULUM CONSULTANT

C. is a 7-year old girl who has been diagnosed with nystagmus, a visual acuity of 20/200 (corrected) and a moderate unilateral hearing loss. She also has physical involvement secondary to brainstem encephalocele. Her cognitive status is solidly within the upper limits of the mildly handicapped range. C. walks using a walker and additional physical support for stability. Deaf/Blind Intervention Program involvement began in October, 1991 when parents requested our input to assist in developing an IEP. Although C. had been attending school since September of that year - placement in the TMH classroom in a school across town from where she lives, with one hour per day in the Kindergarten classroom and 30 minutes per day in the EMH classroom - school staff and family were unable to agree on the frequency and amount of related services C. was to receive.

Deaf/Blind Intervention Program involvement has consisted of the following: five home visits; 3 school visits; attendance at four ARC (Admissions and Release Committee) meetings during which IEP and placement were discussed; recommendation and arrangements for an augmentative communication assessment; presentation of in-service training for C.'s educational team on Activity-Based Programming, Integrating Related Services, and how to implement C.'s augmentative communication system. In addition, the DBIP consultant has accompanied family to doctor and clinic visits, and C.'s present placement has recently been changed to regular ungraded primary, in her home school, with services from the resources teacher provided in the primary classroom on an as needed basis. Additional support will be provided by a classroom aide. Agreement has been reached on frequency and amount of related services C. is to receive, which includes therapies being integrated into classroom and community-based instruction. In-service trainings are being planned for C.'s new educational team.

III. TRANSITION CONSULTANT

J. is 19 years old and has been a day student at the Kentucky School for the Blind for approximately 5 years.

J is congenitally deaf/blind with severe-profound pensorineural hearing loss, glaucoma, cataracts and very high myopia.

Changes in child's life thru Deaf Blind Intervention Program (DBIP):

- Became a client of personal futures planning program
- Received an auditory trainer to improve aural input from instructors
- Spends 1/2 of his day with a Jefferson County Public School TMH class doing community based work activities.
- Through auditory trainer and integration into a regular public high school. J. has become increasingly more social. Looks up when he walks rather than always looking down to avoid contact with people. Initiates interactions with peers and adults.
- Voted for the first time independently in the 1992 Presidential election (This was not a mock election.)
- J. is served by an itinerant hearing impaired teacher using the intergrated therapy model through Jefferson County Schools.
- Is receiving Orientation and Mobility training through Jefferson County Schools because the Kentucky School for the Blind did not identify him as a candidate for traditional Orientation and Mobility training.

IV. STATE COORDINATOR

Personal Futures Planning was initiated in August, 1991 on behalf of a three year old female with multiple disabilities. The child demonstrates both a functional vision and hearing loss. Prior to the initiation of the PFP, the child was receiving all school services in the home which prohibited her inclusion in school and community activities with children her same age. Due to health problems her mother had concerns about her attending Head Start, the contractual agency in the county that serves 3 and 4 year old children with disabilities. At home, she was receiving VI services; Speech; Physical Therapy and one hour (per week) of home instruction through the Local Education Agency.

A group of people were convened including family friends and service providers to determine strategies for including the child in more community activities with the hope that eventually she would begin attending preschool. Her mother's "Dream" for school was: that her daughter have a full-time assistant; that she not ride the school bus; that she maintain some of the same service providers she presently had at home; and that teachers be trained prior to her starting school on how to handle/position her and meet her needs. Between August, 1991 and August, 1992, eight PFP meetings were held to discuss these issues. Each separate issue was addressed and in September, this child began school.

DBIP staff were involved in all aspects of this planning. The Early Childhood Consultant attended all PFP meetings, facilitated by the State Coordinator. She provided technical assistance regarding the child's IEP based on 2 1/2 years previous experience working with the child. The State Coordinator conducted an inservice prior to the beginning of school and another two months later, not only for the child's teacher and assistants, but also for other Head Start staff. The child's grandfather transports her to school and a personal assistant assures that she participates in all class activities. Presently, she attends school two days per week and her mother thinks she may start going more after the first of the year.

Another student the State Coordinator worked with was an 18 year young man with multiple disabilities; severe nearsightedness; functional hearing loss and complex health care needs. The Project was contacted in August, 1991 to participate in a Transdisciplinary Assessment for the young man, due to his questionable vision and hearing. At this point, the young man had never been to school, due to the fact that the district said they "had nothing for him". Consequently, he was awarded 12 years compensatory education. The purpose, then, of the evaluation was to developed an IEP and identify appropriate school services for him.

It was clear, at the beginning of the assessment, that this young man understood much more than what others had ever thought he did. The Speech Pathologist and I quickly discovered that, if spoken to in a loud voice, he could follow simple commands. We identified a simple way for him to communicate: open eyes wide for yes; close eyes for no. Much information was elicited regarding his likes and dislikes, after this was established. Following the assessment, I assisted in the development of an Activity -Based IEP him. DBIP supported a consultant with knowledge in assistive devices to train school staff to use suggested assistive equipment. Eight visits were made to the home to help establish a daily routine for him. At the beginning of this year, another inservice was conducted for school staff, where community based instruction was addressed. Presently, this young man has a full-time assistant that works with him in his home every day and at least one day per week he participates in Community Based Instruction Activities with the local TMH class.

It is important to note the significance of these small steps toward community integration. Prior to intervention, the young man never left his home unless it was to go to the doctor. At the time intervention began, he did not have a wheelchair and therefore had no way of even sitting up while being transported. His ability to learn was extremely limited, not only due to physical deformity, but also due to his extreme visual limitations. Upon recommendation, the family took him to an Ophthalmologist, specializing in working with students who are non-verbal. Now, the young man has glasses and is much more attentive to materials that are presented to him. Most importantly, he now has other people besides family members in his life. Prior to intervention, his parents could never leave the house. His stepfather is now able to run errands during the day while the assistant is there.
Plans are also being made to include other young people from his community in various aspects of his daily routine.

During the evaluation, the family was asked what activities they would like to do as a family. The mother mentioned that she would like all of them to go to a flea market together. One year later, while preparing for departure, the stepfather said "Hey, guess what? We all went to the flea market together!"

SECTION IV

PROBLEMS, SOLUTIONS AND ADDITIONAL NEEDS

This section will deal with areas of concern that have arisen during the course of the project. Temporary solutions will be identified as well as additional needs for the future. The areas of concern include: DBIP staff turnover; ongoing training; and referral resolution.

DBIP STAFF TURNOVER

PROBLEM:

At the beginning of the Cooperative Agreement (1989), the project was without a State Coordinator. It took over a year to fill this position. In the meantime, a part-time person was employed to oversee the administrative aspects of the program. In addition, another staff position was vacant for almost eight month during the second year (Transition Consultant). This position was eventually filled on a .50 FTE basis. This change was based on changes in the project scope during the second year.

SOLUTIONS:

Presently, all positions of DBIP are filled. The Early Childhood Coordinator has been with the project for 5 1/2 years. The Curriculum Consultant has been with the project 4 years. The Transition Consultant, who left in 1990 and returned in 1991, has been with the project for over 5 years. The State Coordinator has now been with the project for 2 1/2 years. The scope of the project has changed such that all consultants have clearly defined roles and responsibilities on the project. It is hoped that this will maintain the morale of the staff and will increase their willingness to staff with DBIP.

ADDITIONAL NEEDS:

Of concern is the fact that the University of Kentucky has not given pay raises to its employees since July, 1991. It is anticipated that pay increases will not occur again in 1993. Several staff have been offered higher paying salaries and to this point, have chosen to stay with DBIP. There is concern that eventually some will leave which would definitely effect the project. Previous experience has shown that it is difficult to fill such positions, due to the large amount of travel involved with each position.

In addition, there is concern regarding the increased responsibilities of the Transition Consultant. That position was reduced in 1991 to a .50 FTE position due to the fact that the PFP project also serves transition-aged students. That project will end in September 1993. Yet, there are not fiscal resources available to increase the Transition position to 1.0 FTE again at that time. The PFP is re-applying for another transition project and it is hoped that, if funded, this project will once again be able to work with students on the Deaf-blind Census.

ONGOING TRAINING:

PROBLEM:

As has been sighted priory, a tremendous amount of on-site consultation and technical assistance has been provided throughout the project. (186 on-site visits and 23 inservices in 1991-92 alone). Of concern is the fact that there remains a high turnover in teachers who serve students on the Census. This results in staff having to repeat training year after year on behalf of the same students. In addition, staff are concerned that, even with repeated training to the same teacher, implementation of suggested programs is often lacking. Resultant is a tremendous amount of effort by staff which sometimes leads to little change for the child.

SOLUTION:

One solution that has been implemented during the course of this Cooperative Agreement has been to ask Educational Teams to develop and implement an action plan following training. Goals, objectives and timelines are identified and returned to the Curriculum Consultant. She returns these Action Plans to each team at 1.2 and 6 month intervals to determine the degree of implementation. This, staff believe, has resulted in a greater degree of change for some students. In addition, additional training needs may be identified when the Action Plan is returned.

Another step that was taken to solve this issue was to require all members of the educational team , including the child's parent, (if possible) to attend the training. The rationale for doing this is that if the teacher does leave, there will be others who may be able to implement suggested changes.

ADDITIONAL NEEDS:

While this model has led toward a fuller degree of implementation, there is perceived a number of children who still do not have quality programs. What is needed is a system for determining the impact of DBIP on specific students. Effort to begin this started this year with the new Cooperative Agreement. Staff following students above (18-21) and below (under 2) mandatory school age are now required to make three on-site visits to each of these students. Also, they must complete data sheets on the number of quality program indicators implemented for each student. Eventually this should be implemented for a sample of school-aged students. It is hoped that this will reveal the degree to which consultation is effecting programming for individual students. Perhaps, staff perception is distorted due to the lack of concrete data.

REFERRAL RESOLUTION

PROBLEM:

Each year, a large number of students are referred to DBIP. Typically a determination is made as to whether the student qualifies for services through a home or school visit. Given the amount of travel consultants do to deliver technical assistance and consultation, long periods of time may pass before a visit is made. As a result, between 25 and 35 students remain in referral at all times. These are students that may need immediate services from DBIP.

In addition, the Deaf-blind Census for Kentucky is always low according to National Incidence figures (Last year, there should have been 165 students identified when in fact there were only 110 on the Count.) While SHIPP and all presentations given by Project Staff serve as vehicles for Child Find, intense efforts are prohibited due to the intense level of service provided.

SOLUTIONS:

One solution to this problem has been implemented. In 1991, the referral form distributed to those who refer children was revised. In the new form, selected questions regarding the students vision and hearing were listed. Based on this information, staff determined if a valid referral was made. This resulted in staff not making visits to places where the referral was inappropriate.

In the 1992-95 622 Proposal, an activity was proposed that might have further rectified this problem. It was suggested that an individual be employed to oversee Child Find and Referral Resolution. In addition, this person would have developed a training for school psychologists and diagnosticians in the identification of students with dual sensory impairments. Those persons, would then have had the skills to certify students for the Census. Unfortunately, the negotiated funding level for the 1992-95 project prohibited the implementation of this program. However, should all funds for Inservice Training not be expended during 1992-93, a Summer Institute might be conducted, near the end of the project period that would implement this model.

ADDITIONAL NEEDS:

It is believed that the above model would provide a reasonable solution to the identified problem. DBIP has been funded for two years (1992-94). However, in the third year of the current Cooperative Agreement, a request will be made to add this activity. Otherwise, other resources will have to be located to try and implement this process.

In addition, other efforts can be made to assure that all students in Kentucky with Dual Sensory Impairments are identified. Staff intend to actively identify students through poster sessions, presentation, and on-site visits throughout the state.

SECTION V
PRODUCTS DEVELOPED

Below is a list of the products developed by DBIP during the previous project period. Each product is described; the intended audience is noted; the date of production is listed and the dissemination of product is noted. After this description, a copy of each product is included following the same order as the list.

1. BROCHURE: A new brochure was developed by the project in 1991 to reflect the way in which DBIP delivers services. The brochure is disseminated at state and national poster sessions; to families and services providers who refer children; and to inquiring parties.

2. NEWSLETTER: In cooperation with the PFP project, a newsletter is developed three times per year. Parents and children on the Census contribute to the newsletter. The first newsletter was developed in fall of 1990. Since the intent of the newsletter is to keep families apprised of project activities, funds from the Hilton/Perkins grant are used to develop the activities. DBIP's contribution includes: editing the newsletter; disseminating it to all parents with children on the Census; and actually putting it together. In addition to families; DBIP disseminates the newsletter to all Steering Committee members and subcommittee members.

3. DIRECTORY OF SERVICES FOR PERSONS WITH DUAL SENSORY IMPAIRMENTS: Due to the fact that there are a number of projects in Kentucky that serve individuals with Dual Sensory Impairments, all projects collaborated to develop a central directory. The intention was to alleviate confusion regarding the various services. DBIP collected information from: PFP; HKA; HKNC; Traces; Hilton/Perkins Grant; and

Kentucky Systems Change and developed this product. It was completed in Spring 1991. The directory is disseminated to all families and service providers when a child is certified. In addition, it was disseminated to all Steering Committee members. It is also used at Conference presentations and poster sessions. The directory is available in Braille.

4. PEOPLE CONCERNED WITH DUAL SENSORY IMPAIRMENTS: A PUBLIC DIRECTORY: While the current version of this directory was gathered by the parent group (PCDSI), DBIP staff developed the first such directory in 1992. The intent of this directory is to list all parents with children on the Census (with their written permission). All parents are given a copy so that they may speak with other families who have children with Dual Sensory Impairments.

5. CURRICULUM MODULES FOR TEACHING STUDENTS WITH DUAL SENSORY IMPAIRMENTS: While these modules were initiated under the former Cooperative Agreement, they were not completed until fall, 1990. Each Institute of Higher Education received one copy. The State Coordinator took a copy to Project Director's meeting in fall 1991 for a poster session. As a result 23 copies were sent to other projects serving children with Dual Sensory Impairments. Due to the cost of printing, the entire set of modules (over 300 pages in length) are not included. However, copies may be obtained for the cost of printing from the State Coordinator.

6. DEVELOPING PROGRAMS FOR STUDENTS WITH SEVERE HANDICAPS USING BASIC SKILLS IN THE CONTEXT OF AGE-APPROPRIATE PRIORITY ACTIVITIES: This document, written by Melissa Hudson (Systems Change) and Jennifer Leatherby (DBIP) describes a process for writing IEP objectives using an activity-based curriculum model. The student described in the document has a Dual Sensory Impairment. Although, not published, the document has been disseminated widely in training conducted both by DBIP and Systems Change. In 1991 the document was presented at the Kentucky Council for Exceptional Children Conference. It is intended that the content from the document will be included in a broader document that is currently being written by project staff on how to include students with Dual Sensory Impairments into aspects of KERA.

7. SERVICES FOR STUDENTS WITH SPECIAL HEALTH CARE NEEDS: This document was also -authored by a staff person with the Kentucky Systems Change Project (Pam Smith) and the State Coordinator. DBIP's interest in this topic resulted from the large number of students on the Deaf-blind Census who also experience special health care needs. The document, still in the final stages of editing, has already been widely disseminated in its draft format. The authors presented the document in 1991 at the Office of Special Learning Needs Conference and in 1992 at the Kentucky Council for Exception Children Conference. The State Coordinator also presented the document in 1992 at the State Early Childhood Conference. Due to the fact that the Kentucky Nursing Board has endorsed the document they have recommended it to other state Nursing Boards. As a result 28 copies of the document have been disseminated. After final revisions are made (early 1993) the document will be disseminated to every Special Education Director and School Nurse in the state of Kentucky. Due to its length (over 150 pages) a copy of the document is not included. Copies can be obtained for the cost of printing from Kentucky Systems Change Project (114 Mineral Industries Building, University of Kentucky; Lexington, Kentucky 40506-0051).

The DBIP is a federally funded technical assistance program for infants, toddlers, children and youth in KY who have dual sensory impairments. The program is sponsored by the University of Kentucky and the Kentucky State Department of Education.

For more information contact:

Deaf/Blind Intervention Program
229 Taylor Education Building
Department of Special Education
University of Kentucky
Lexington, KY 40506-0001

(606) 257-7909

OR

Deaf/Blind Intervention Program
c/o Kentucky School for the Blind
1867 Frankfort Avenue
Louisville, KY 40206

(502) 897-1583

Deaf/Blind Intervention Program
229 Taylor Education Building
Department of Special Education
University of Kentucky
Lexington, KY 40506-0001

DEAF-BLIND INTERVENTION PROGRAM

Reach for the Stars

Sponsored by

The University of Kentucky

and the

Kentucky Department of Education

WHO qualifies for services through the Deaf/Blind Intervention Program (DBIP)?

The DBIP serves infants, toddlers, children and youth birth through 21 years of age who have a vision and hearing impairment in combination. Persons with dual sensory impairments usually have some residual vision and/or hearing.

WHAT services are provided by the DBIP?

- Functional vision and hearing assessments for those referred
- Onsite consultation statewide to families, educational and vocational programs who have children/students with dual sensory impairments
- Training and inservice seminars and workshops for families, educational and vocational programs to target training needs identified by a needs assessment
- Technical assistance and resource identification
- Coordination of individual transition planning for students on the Kentucky Deaf/Blind Registry

GOALS of the DBIP ❑ ❑ ❑

- The overall goal of the DBIP is to provide training and technical assistance to families and educational programs to improve the quality of education and related services in KY for individuals birth through 21 who have dual sensory impairments. The emphasis of training and technical assistance is based upon the principles of:
    - ☛ Use of age-appropriate activities, materials & settings
    - ☛ Integrated environments
    - ☛ Community-based instruction as well as school based instruction
    - ☛ Active parent/family participation
    - ☛ Partial participation in functional activities
    - ☛ Activity-oriented programming
- Identify needs and represent interests of individuals in KY with dual sensory impairments.
- Develop and implement preservice and inservice training for KY's CSPD
- Implement training and services for young children under 5 based on KY's state plan under PL 99-457 parts B & H
- Formalize coordination of transition through the ITP process and Personal Futures Planning
- Develop and coordinate quarterly newsletter
- Establish and collaborate with Parent Support Network
- Establish and coordinate efforts with Family Advisory Board
- Disseminate annual needs assessment to families and educational program staff for purpose of planning inservice training

OTHER activities of the DBIP ❑ ❑ ❑

- Annual faculty seminar
- Annual family forum
- Annual Summer Institute
- Helen Keller Awareness Week
    - ☛Student of the Year
    - ☛Contributor of the Year
- Coordinate SHIPP training
- Collaborate with Personal Futures Planning
- Collaborate with KY Systems Change Project
- Members SPLASH training team
- Coordinate KY Deaf/Blind Steering Committee
    - ☛Transition Sub-Group
    - ☛Early Childhood Sub-Group
- Present at various training workshops, seminars and conferences

I N S I G H T

Reach for the Stars

Volume 2, Number 3 Jennifer Leatherby, Editor Fall 1991
Brenda Pezzarossi, Parent Coordinator

SUMMER INSTITUTE PARENT PANEL

From July 15-19, the Deaf/Blind Intervention Program co-sponsored a Summer Institute with the Kentucky Systems Change Project. The topic for the Summer Institute was Issues Regarding Students with Complex Health Care Needs. Approximately 30 teachers from across the state attended this training.

On the last day of the training five parents of children with complex health care needs spoke about their feelings of having their child go to school in an integrated environment. They also discussed problems they have had in getting schools to accept their child because of their medical conditions. They were very open about their fears for their child's future given the constraints of community services as they presently exist.

All in attendance were moved by the honesty and openess of these family members. As a professional, I was once again reminded that the most important member of the educational team is the parent and that parents' thoughts and opinions should never be overlooked. I felt that some of the comments made that day were quite profound and wanted to share some with you. I suspect many family members, regardless of the type of disability their child has, shares some of these same feelings.

In regard to teachers and other service provider:

Sometimes "teachers are the only people parents have to talk to about their child. Neighbors, other family members, etc. don't want to hear it."

"You really don't want professional people too interested in your child .... because the more professionals there are, the more problems (the child) has."

"Too many people working with people with disabilities are just doing a job."

"Just accept my child."

"Teachers should know that you can depend on parents too."

"The bottom line is that I want you to treat my child as a human being."

In regard to integration:

"How integrated you are as a teacher (in your school) relates to how well the child will be integrated."

"....an environment in which enrichment and progress can occur."

"Strangers in an institution are not going to do the little things that make life worth living."

"You put a lot of people with different behaviors together and you just get more different behaviors."

In regard to parenting a child with disabilities:

"Know funding sources."

"We're like all parents, we like to talk about our kids."

"Its where you're at (emotionally) and what you are willing to accept at the time..."

"Parents are your most valuable resource when it comes to their child."

If you would like to contact any of the parents who participated on the parent panel, you may contact them at the number/addresses below:

Doug and Connie Riddel 34 Timberlawn Circle Frankfort KY 40206		(502)695-3475
Gene Nochta 877 Gregory Way Lexington KY 40514		(606)223-8742
Beverly Branscum 12201 US 42 Walton KY 41094		(606)485-6145
Marilyn Tomes 743 Lone Oak Drive Covington KY 41015		(606)431-6676
Brenda Pezzarossi	HM	(606)272-1992
	WK	(606)257-3586

MORE...Original Parent Quotes for 1991

"Our daughter never seemed to fit the multitudes of classifications set up to serve individuals with disabilities. Over the years, we've become experts at finding providers who have the inner strength to bend the rules without breaking them." by *Doug and Connie Riddell*

"Once a special education teacher asked me if I had any ideas to help include my child into school activities. I had to say, "Integrate yourself, first." by *Gene Nochta*

"My greatest fear about the future for my child is that she will outlive me. I need to always be here to give her the best care humanly possible because I know she would not survive otherwise." by *Beverly Tomes*

"I used to be a very insecure, shy person until I found out my daughter was diagnosed with Ushers Syndrome; since then, it seems like I am always fighting. If I stop fighting, there won't be a future for my daughter." by *Sharon Cole*

"In my lifetime, I have progressed a great deal toward bringing my original dreams for my daughter into compliance with reality. Now all I want to do is change the reality for her. Our greatest problem continues to be society's ability to offer a meaningful life for her." by *Jean Gossick*

"When in doubt about what the future holds for my son, I believe it's better to listen to what he's trying to tell me even if it's not in words, rather than to follow the stacks of dictated medical and psychological evaluations that have accumulated over the years." by *Brenda Pezzarossi*

"When something from the past concerning my son's problem is bothering me, I just write it on toilet paper and flush it down the toilet." by *Dawn Jacobs*

FAMILY FORUM

From August 23 - 25, families with children on the Kentucky Deaf/Blind Registry met at Otter Creek Park in Vine Grove, Kentucky for the Second Annual Family Forum. The Family Forum was co-sponsored by the Kentucky Deaf/Blind Intervention Program, the Personal Futures Planning Project and the Kentucky Parent Support Network (sponsored by the Hilton/Perkins National Foundation). Thirteen families were represented at the Family Forum with 42 family members in all!!

Parents were introduced to the Personal Futures Planning Process on Saturday and Sunday. Carolyn Wheeler and Hope Leet Dittmyer of REACH in Louisville provided the group with an overview of the process. The remainder of the time was spent doing Personal Profiles on each child with input from the family. Facilitating this process were professionals who had been trained in the development of Personal Futures Plans. We appreciate them giving their time for this effort.

While their parents were hard at work, the children enjoyed such activities as painting t-shirts; swimming, and making snacks. The respite activities were organized by Beth McClure and Patti Allen of Louisville. We wish to thank them and all the the wonderful respite workers who helped make the weekend so successful.

On Friday and Saturday evening, families gathered for a social hour on the patio of the lodge overlooking the Ohio River. We thank Cecille Snellan of Shepherdsville, KY and Brenda Pezzarossi for providing us with refreshments. On Saturday evening, everyone gathered in the parking lot for an exciting game of kickball which was organized by some very creative young people. Later we "replayed" the game in Brenda Pezzarossi's room, who had filmed the entire event!

The family forum was well received by all in attendance. Below are some of the comments families made following the weekend:

I liked the workshop because:

-It " let us share other ideas to help other families."

-"I learned a lot of new ideas of how to take care of my child. Meeting parents and getting to become friends."

-"It was a wonder, gratifying experience, very positive and constructive."

-"There is hope for a better future for my son."

-The facilitator "was very helpful --- understanding about our concerns for (our son)"

-"It gave me a better view of how to help my son and maybe in the future help others with disabilities."

-"It is relevant to our situation. So often I go to workshops that are supposed to be about severely disabled children, but there is very little relevant to us."

-"Enjoyable, played kickball"

-"It helped me to express my fears and dreams for (our daughter's) future. And that I will have a group of people help me to work this out for my daughter. Or try to make it come true. And not be alone in it."

-"I was involved and am going to benefit from the information."

-"It was informative and excellent and I met a lot of very nice people and renewed some friendships."

-"The kids had a good time in respite care"

-"I got to meet others with a handicapped brother or sister."

The weekend was a wonderful opportunity for families with children with dual sensory impairments to share and spend time with one another. If you were unable to come this year, we hope we will be able to join us next year. We hope to have information about where and when we will have the Third Annual Family Forum much earlier next year.

THANK YOU! THANK YOU!
...To Nice People and Wonderful Businesses

You made our weekend of planning must more exciting because of your contributions to the grab bags that went home with each participant.

Our Thanks To:

Bacons, 3000 Bardstown Rd., Louisville, KY 40218 for perfumes and lotions.

Carolyn Cole, 8204 Judge Blvd., Louisville, KY 40219 for helping.

Norman Cole, Local Union 633, 3128 Alvery Park Dr. W., Owensboro, KY 42303-2138 for ink pens.

First National Bank, First National Tower, Louisville, KY, 40202 for scratch pads.

Jefferson County Clerk, Rebecca Jackson, 532 Court Place, Louisville, KY 40202 for pencils.

Operation Brightside, 200 Legals Arts Bldg., 7th and Market St., Louisville, KY 40202 for trash bags, rulers, and magnets.

Welborn Florist, 920 E. 4th St., Owensboro, KY 42301 for flower arrangement.

Walmart, 4610 S. Frederick, Owensboro, KY 42303.

The above contributors were contacted by one of our parent advisors, Sharon Cole of Designing Women, Specialty Advertising Counselors, (502) 276-3306.

* * *

If you and your family have benefitted from activities initiated as a result of the Hilton/Perkins National Foundation Grant and you would like to show your support of the continuation of this project, you may do so by writing a letter to Steve Perreault at the address below:

Steve Perreault, National Consultant
Hilton/Perkins National Program
Perkins School for the Blind
175 North Beacon Street
Watertown, Massachusetts 02172

(Please refer to this project as the Kentucky Parent Support Network in any correspondence to Mr. Perreault.)

* * *

A Future for Jason
An Interview with Margarita Arnett

How did you first hear about the Personal Futures Planning Project?

I heard about it first from Marie Ruf. She's the transition coordinator for the Deaf/Blind Intervention Project.

What do you remember happened next?

I went to Atlanta, Georgia to a national conference with Sandy Baker. She works in Louisville with the Deaf/Blind Intervention Program. I went along as the parent representative. We had a lot of meetings and went over things to do. We had some good ideas for other parents such as doing a newsletter, but we didn't have time to get all our ideas done. You know I still have to be here to take care of Jason and I'm working.

Why do you think we need a Personal Futures Planning process for your son, Jason?

I want Jason to be as productive as he can in his future. I don't want him just sitting around watching t.v. for the rest of his life. I won't always be here to take care of Jason. Before we had these kind of meetings, we didn't have any hope that there could be a productive future for Jason.

When was Jason's first meeting?

It was back in April of last year. That was the first time. I didn't do much with it before that. You know I'm working at the school full time. For that first meeting, I asked Katie Dennis, a friend of mine if she'd come. She couldn't come, but said she'll come to the next one. Jason's special education teacher was invited, but didn't come. I invited the preacher, but he moved before the next meeting. Sam, a high school student, become acquainted with Jason back when he was in fifth grade while I was teaching. He used to come in and talk to Jason. I invited Sam and he came to our first meeting. He had some great ideas about what Jason could do.

What is the hardest thing for you to do concerning the planning meetings that you have had for Jason?

The hardest part was just asking somebody else for help...that they might say no or that I would be imposing on them. I've been pretty independent all my life and I hate to ask people to do things for me. I know now, all they can do is say no. It might hurt my feelings, but it's not for me, it's for Jason! The first meeting we had, I didn't understand what it was really all about; so, I couldn't ask. All I could think of to say was, "Can you come to a meeting"? I couldn't seem to explain it good enough. Now it's better. It's much easier because I know more now about what it is we're meeting about.

How has the Personal Futures Planning Project helped your son, Jason Arnett?

It gives us hope. We hope to be able to get him more involved out in the community. Before school started, Harold Kleinert met with us at the school. We're making progress toward getting Jason into the high school so he'll be with kids his own age. It has helped us find out about other things that might help Jason. For example, Jennifer Leatherby at UK helped me take Jason to a speech pathologist at Humana to explore different communication device systems. Jason had a communication device called a Wolfe system, but we couldn't get it to work. We're going to get together again to determine if they can make the one he has work better or if Jason needs something else.

What benefits did you and your family gain by attending the Family Forum Weekend at Otter Creek?

I really liked the idea of helping someone else, another family, another child with special needs. It just made the whole process seem more real. When Carolyn Wheeler put up all those big poster papers all over the walls, it made Jason's future seem more real. It seemed more like Jason really does have a future. It was more real than when we were just talking about it in our living room at those other meetings before that. I think showing it to someone else made it seem more like what we want for Jason is possible.

How has being included as a family in the Personal Futures Planning Project enhanced life for Jason?

Through this, we have met a lot of caring people. It made us seem more a part of something instead of having to go through this by ourselves. We don't have to be alone.

NEW RESOLUTIONS
PARENT ADVISORY MEETING
LOUISVILLE, KY

On Saturday, September 28, 1991, we received parent input into the operations of our Deaf-Blind Intervention Project. We were delighted to have fathers participating in addition to our usual mother involvement. Parents, we need more of you to attend advisory board meetings to tell us what your families need. Based on previous parent advice, we will be getting a toll free number for parents to call. Our new number will be obtained through the Personal Futures Planning Project grant which coordinates with the Deaf-Blind Intervention Project at the University of Kentucky.

Our parent group evolved into a "founding committee". We resolved to work to bring a "voluntary parent/interested persons" group into existence. We condensed our extensive mission statement into one sentence. Our mission is to develop, improve, and provide support for parents of children with dual sensory impairments. We need a parent support group and network of parents which will serve us on a more permanent basis. Parents, we need you to help us with our dream. Think up new resolutions and make recommendations about who will gather for our next meeting.

As parents,we know we need a "parent network". We need the support of other parents who are going through similar experiences. We want to establish a directory of interested persons. Our main problem is with confidentiality guidelines which prevent professionals from revealing names to other parents. Parents decided that we will send all parents a permission form asking for the approval to share names,addresses, and phone numbers with each other. Expect to find a letter in your mail box sometime in the next two weeks requesting your signature to give your name, address, and phone number to other parents.

RESOURCES FOR PARENTS

ASSESSMENT FOR CHILDREN WITH DISABILITIES - Kaye Langer (606)257-4644, Pat Berdine (606)257-1254.

ACCESS for link with services for developmental disabilities & M.R. Nelda Stephans, (606)233-0444.

ADVOCATE FOR DEAF-BLIND PERSONS - Cherry King (502)839-7556.

COMMISSION ON THE DEAF AND HEARING IMPAIRED - William Rogers 1-800-382-2907.

CONSULTATION FOR ATTENTION DEFICIT DISORDERED CHILDREN, Bobbie Burchan (606)257-7372.

DIRECTIONS - information about services for the disabled, Karen Stone & Dawn Jacobs, Parents: 1-800-234-0497.

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KY TALKING BOOK LIBRARY for service information 1-800-372-2968.

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PRESCHOOL - KY DEPT OF ED for ages 3 - 5 Debbie Schumacher, (502)564-4970.

PROTECTION & ADVOCACY - Help with legal rights of disabled children and adults 1-800-372-2988.

SKI-HI Help for parents with young hearing impaired children Andy Hensley (606)357-7939.

FYI CORNER

Deaf Blind Intervention Program
Jennifer Leatherby
UK Special Education Department
229 Taylor Education Building
Lexington, KY 40506-0001
(606) 257-7909 *

Diane Haynes,Sandi Baker, and Marie Ruf
1867 Frankfort Avenue
Louisville, KY 40206
(502)897-1583 **

Helen Keller Affiliateship
Janis Friend
Dept of Vocational Rehabilitation
627 W 4th St
Lexington, KY 40408
(606)255-1431

Systems Change Project
Dr. Harold Kleinert
UK Interdisciplinary Human Development
114 Mineral Industries Building
Lexington, KY 40506-0051
(606)257-3045 *

Jacque Farmer
UK Interdisciplinary Human Development
114 Mineral Industries Building
Lexington, KY 40506-0051
(606)257-3560 *

Personal Futures Planning Project
Carolyn Wheeler
1867 Frankfort Avenue
Louisville, KY 40206
(502)894-9366 *

Cynthia Vaughn, Parent Coordinator
1867 Frankfort Avenue
Louisville, KY 40206
(502)894-9366

Brenda Pezzarossi, Parent Coordinator
UK Human Development Institute
114 Mineral Industries Building
Lexington, KY 40506-0051
(606)257-3586 or (606)272-1992 *

*Answering Machines located on these phones.

**In order to make it more convenient for you to contact staff of the DBIP, we have now installed answering machines in the offices of Sandi Baker, Diane Haynes, and Marie Ruf. If you want to contact any of the three of them, simply call KSB at (502)897-1583 and ask to speak to one of them. The receptionist will ring their office and if they are unavailable, leave your name and number and they will get back with you. Hopefully, this will reduce your long distance calls and allow us to service you better!

A CONFERENCE ON SUPPORTED LIVING

ONE ANSWER TO PARENTS' CONCERN ABOUT FUTURE LIVING ARRANGEMENTS FOR PERSONS WITH DISABILITIES

What is supported Living? Supported Living is:

- The opportunity for a person with disabilities to make his or her own decisions
- Individualized, flexible services and supports
- Safe, secure, permanent housing
- Independence and Integration
- A new way of thinking

The Personal Futures Planning Project will be able to reimburse parents of transition age students (ages 14 - 21) who would like to attend this conference. Please call Carolyn Wheeler at (502)894-9366 for information regarding expenses which can be covered.

Mark this date! November 16, 1991. Registration will begin at 9:30 a.m. The first session will begin at 10:00 a.m. Lunch will be served at Noon, with the afternoon session concluding at 4:00 p.m. An informal cracker barrel session will run from 4:30 p.m. until 6:00 p.m. The one day workshop is located at the Campbell House Inn at the corner of Harrodsburg Road and Mason-Headley Road in Lexington. Registration is being handled by Carrie Stith, IHDI, University of KY, 113 Mineral Industries Building, Lexington, KY 40506-0051.

CALENDAR OF EVENTS

If you want to know more about the events listed, please call the contact person listed below.

10/10-10/12 - Looking Into the 90's: Aging Developmental Disability Conference. Springs Inn, Lexington, KY. Jim Stone (606)257-5244.
10/22-10/25 - SHIPP Module II Teacher & Direct Service Provider Training Diane Haynes (502)897-1583.
10/23-10/24 - The Buck Starts Here Conference Funding for Technology for Disabled, Hurstbourne Hotel, Louisville, KY (800-327-5287.
11/1 - Fall Early Childhood Conference, Eastern KY University, Richmond, Jane Ellen Myers (502)839-3406.
11/9 - Council for Exceptional Children Conference, on Preschool Integration. Child Development Center of the Bluegrass, Lexington, Teresa Wasson (606)271-3939.
11/24-11/26 - Exceptional Children Conference, Galt House East, Louisville, Preston Lewis (502)564-4970.

JUST THE FACTS

The **Personal Futures Planning Project** began on October 1, 1990 and is federally funded by the Office of Special Education Program for three years.
Project Director: Harold Kleinert
Associate Project Director: Carolyn Wheeler
Parent Coordinators: Brenda Pezzarossi and Cindi Vaughn

What is **Personal Futures Planning**?

- ➡ A creative process designed to help a group of people craft a life of meaning and contribution for the person who is the focus of the planning.
- ➡ Personal Futures Planning is not just another technique to be added to the human service industry of fashionable fixes.
- ➡ Meaningful Futures Plans are not constructed carelessly or mass-produced.
- ➡ Personal Futures Planning is an ongoing process of mutual education, discovery, and adventure.
- ➡ An effective Futures Plan should inspire people to act on behalf of the person with a disability.

-from Making Futures Happen by Beth Mount

FIVE IDEAS THAT INCREASE CHANCES

. . . . . that a Person with Disabilities will move toward A Desirable Future

1. A group of people agree to make the person their focus and to include the person in everything.
2. The group builds a clear, shared appreciation of the person's interests, gifts, capacities and challenges.
3. The group creates with the person a common understanding of a specific, positive future linked to the capacities of a particular community.
4. The group honors mutual commitments to decide on next steps, review what's working and what needs to change, and to take action, both individually and jointly.
5. At least one organization is willing to commit resources to support the person's future.

Five Questions that Guide the Development of a Dream:

How can we expand and deepen people's friendships?

How can we increase the presence of a person in local community life?

How can we help people have more control and choice in life?

How can we enhance the reputation people have and increase the number of valued ways people can contribute in community life?

How can we assist people to develop competencies?

-from Making Futures Happen by Beth Mount

****

New Parent/Guardian Survey

Helpful with Transition Planning
for Your Son or Daughter

The new Individuals with Disabilities Education Act (IDEA) or Public Law 101-476 adds transition services to students' IEPs, and makes changes in transition programs authorized under Part C of the law.

The new law adds a specific reference to transition services to the overall definition of the Individualized Education Program. IEPs must now include:

"A statement of the needed transition services for students beginning no later than age 16 and annually thereafter (and when determined appropriate for the individual, beginning at age 14 or younger), including, when appropriate, a statement of the interagency responsibilities or linkages (or both) before the student leaves the school setting."

Some Futures Planning Questions

Anticipated Services Needed

1. Which of the following services are you currently in need?
2. Which of the following services do you anticipate your son/daughter to need after (s)he leaves high school?

	CURRENT NEED	FUTURE NEED
a. Employment Placement	___	___
b. Income Support	___	___
c. Medical Services	___	___
d. Transportation	___	___
e. Case Management	___	___
f. Guardianship	___	___
g. Other	___	___

3. What are your greatest concerns about your son/daughter's program at the present time?

4. What are your greatest concerns for your son/daughter after (s)he leaves high school?

The above information is from Transition Planning for Students with Disabilities presented by Preston Lewis, Collaborative Strategies Branch, Division of Special Learning Needs, (606)564-4970.

PROGRESSING TOWARD INTEGRATION

Topics of interest to families of school age students with disabilities were covered in the sixth annual Bluegrass Special Education Conference held Septemnber 18-20 in Lexington. Sessions included such topics as:

- Using School Technology to Assist Families with Special Needs
- Performance Assessment for Children and Youth with Disabilities
- Integration of Students with Disabilities Using Assistive Technology
- No More Pull Outs: A Collaboration Model
- Participation of Students of Special Populations in Extended School Services.

Kentucky's new chief of staff for the Kentucky Department of Education, Lois Adams-Rodgers gave an inspiring keynote address in which she acknowledged that her son and her own parenting expierience have had the greatest impact on her work as a special educator.

The conference was sponsored jointly by the Fayette County Schools, Office of Exceptional Children, University of Kentucky and the Kentucky Family based Services Coalition.

NEWSLETTER PURPOSE

To inform parents and service providers of children and adults with dual sensory impairments regarding projects of the Deaf-Blind Intervention Program and the Personal Futures Planning Project. The Deaf-Blind Intervention Project has been serving children and youth with dual sensory impairments since 1977 and is sponsored jointly by the University of Kentucky and the Office of Education for Exceptional Children. The Personal Futures Planning Project assists families of students with dual sensory impairments and service providers in developing Personal Futures Plans as part of the students' transition from school to adult life. The Personal Futures Planning Project, awarded by the University States Office of Special Education to the University of Kentucky, began on October 1, 1990, addresses the critical need in transition from school to adult life. Presently, approximately 120 children and youth and their families receive technical assistance and consultation from these two projects. By the project end Personal Futures Planning will serve 30 of the 120 persons.

DEAF-BLIND INTERVENTION PROGRAM
229 TAYLOR EDUCATION BUILDING
DEPARTMENT OF SPECIAL EDUCATION
UNIVERSITY OF KENTUCKY
LEXINGTON KY 40506-0001

INSIGHT

I N S I G H T

Volume 3 Number 1
Jennifer Leatherby, Editor
Brenda Pezzarossi, Parent Coordinator
Spring 1992

National Deaf-Blind Bulletin Board Available to Kentuckians

Using a computer, modem, and communications software, anyone can now call **SpecialNet**, a national computer access reached by subscription by calling 1-800-927-3000. The fee for private membership is a $35.00 setup fee and an annual fee of $25.00 plus any long distance charges. If you only call toll free numbers, there are no additional charges; however, you will also need the gadgets mentioned in the opening line before you initiate this process.

Since the third week of January, personnel with the above hook-ups have been able to begin interactive communications by asking for announcements, training, collaboration, resources, and reviews across many state deaf-blind projects and federal sponsoring and operating agencies. The bulletin board is titled **DEAFBLIND** and you may sign on by placing "the" in front of the board title. The new board is sponsored by TRACES in Oregon with the editor located at the California Deaf-Blind Services.

On a more local level, at U.K.'s Interdisciplinary Human Development Institute, we have been able to add this new bulletin board to the weekly readings done by the (MSRRC) MidSouth Regional Resource Center. We can then access the readings through our own MacIntosh computer and relay to you any thing of interest. Please contact Brenda Pezzarossi for more information at **1-800-365-1258** or 606-272-1992 or 606-257-3586.

The following quote was used by Mike Meyers, Ohio's advocate for persons with significant disabilities living "on their own" at a Supported Living Workshop held in Lexington, KY.:

> "the sin in NOT in setting the goal too high and missing, but in setting it too low and hitting." by Jesse Jackson

RALLY TO SUPPORT PROGRAMS FOR INFANTS AND TODDLERS WITH DISABILITIES IN KENTUCKY

On Tuesday, February 25 at 1:30 p.m. there will be a rally in Frankfort to support infant toddler programs for children with disabilities in Kentucky. Parents who support the idea of early intervention are urged to attend. The rally will be on the Capitol steps on Capital Avenue in Frankfort. (The rain-out location is the Capitol Rotunda.) The purpose of the rally is to raise legislators' awareness of the importance of infant toddler programs and to support funding during the next fiscal year, in the amount of $10 million, to continue these programs. If your child benefitted from such programs, this is a wonderful opportunity to let others know how important such programs were to you and your child. If you are unable to attend, please contact your legislator and let them know how important these services are. You can reach them at: 1-800-372-7181. Leave a message with whomever answers and tell them how you feel. ***YOUR INPUT MAKES THE DIFFERENCE!!!!***

Parent Testimony Impacts Professionals and Other Parents

The following speech is taken from the testimony given to the Deaf-Blind Intervention Project's Parent Advisory Board Meeting on January 15, 1992 at the Breckinridge Inn in Louisville, Ky.

Continued on Page 2

Continued from Page 1

"Hello, I'm Sharon Cole, the one that sent the letter out inviting you all to join us here today. The reason for this meeting is to begin organizing a state wide support system for and by parents and/or family members who have deaf and blind sons and daughters. I'm sure that most of you have experienced difficulty and frustration in coping with the problems facing us and our deaf-blind child.

We, as parents are no different than any other parent in wanting the best for our children. Who knows better than us, as parents, what our childrens' needs are? We do have many needs! Needs such as identifying and reaching out to families, particularly those in rural areas with small children. There is the need for resources and training to assist with stress management, the need for training to develop advocacy and leadership skills. There is the need for accessible and current information, including medical, respite care, and financial assistance. There is a great need for increased employment and community living options for those with the greatest disabilities. There is also the need for sharing our concerns and experiences with each other and the need for sharing the expertise of those who have succeeded.

If we do not address these needs while our children are still young and in the school system, our child will fall through the cracks, and many do any way due to lack of public awareness, knowledge, and communication skills. People with vision and/or hearing loss have been very neglected. We need to make the public aware that such disabilities exist and that we have needs to be met. We can't do this alone! We can't expect the professionals to do this alone. We need to work as partners with professionals towards becoming a more powerful source in establishing services to improve the quality life for our sons and daughters.

I'd like to share with you my personal testimony of what life was like when I learned of my daughter Kelly's disability. Kelly was three years old when she started having ear infections. Her father and I had just recently divorced, and it seemed that when we divorced he just disappeared from our lives. I was receiving some financial assistance from the State. Kelly had a medical card which really didn't seem to do any good. When she had an ear infection I'd have to take her to the emergency room because there weren't any doctors in Owensboro who would see her with a medical card. We fought with ear infections off and on for quite some time.

Then I remarried and my husbands' insurance would not cover stepchildren. I could not get insurance for Kelly after we learned that she had asthma and this hearing disability. We were very fortunate to meet Dr. Cohen at the hearing clinic in Louisville. He sympathized with us and he knew that Kelly had a permanent and progressive hearing loss. He fought very hard to get her into the program with the Commission for Handicapped Children. We were very fortunate in being accepted into this program and we made some very good friends there. Three ladies, who worked for the Commission, seemed to fall in love with Kelly and they became very close personal friends of ours over the years.

During this time I had developed ulcers, my new marriage was on the rocks, and I had a nervous breakdown and was hospitalized. Then, when I could see that Kelly was functioning. . . she would turn the television set on. She would enjoy watching T.V. even though she couldn't hear anything and she was still enjoying life. I decided it was time that I overcome some of my problems and started enjoying life again also.

We were on the road to recovery, I thought, until Kelly was diagnosed with Ushers Syndrome at the age of 10. They called me at home and told me that Kelly needed to be seen in Louisville. It was a month before we would get an appointment. I knew something was wrong, but they really didn't want to tell me. Being the kind of person I am, I wouldn't let them hang up until they would tell me what it was that they suspected. They did tell me that they thought Kelly would lose her sight, but I was not allowed to tell Kelly because they hadn't made this diagnosis and didn't want to upset her. I had to go for a month pretending that nothing was wrong. Kelly knew me well enough to know that something was wrong. We came to Louisville, had the tests done, and the diagnosis was correct. Kelly had Ushers Syndrome.

They thought that I should send her away to the Kentucky School for the Deaf for her education. This was very difficult for me. I could not send Kelly and she did not want to go in the

Continued on Page 3

Continued from Page 2

beginning. Then, she made the decision on her own to go. She was there for two years. Greg Whittington, a psychologist at the U.L. School of Medicine, stayed in touch with Kelly to let her know he cared after she went away to school. However, we had problems at the School for the Deaf. They knew that Kelly had Ushers, but they were not allowed to talk about it. They had never informed the teachers or anyone else there that Kelly had Ushers. She had many accidents there.

During this time I got a call from Marie Ruf, with the Deaf-Blind Intervention Project, who was a life saver at this point. There were times when Kelly was first diagnosed with Ushers that I even considered suicide. Then I thought that I couldn't do something like this and leave my daughter behind. I thought that maybe it would be best if neither Kelly nor myself either one lived. . . that we couldn't have much of a life and I couldn't enjoy seeing Kelly suffer.

Kelly, again, made me realize that this is not the way it should be. She was a very happy little girl. Kelly loved life. She enjoyed life to the fullest. We were on our way to recovery again. Marie had made me understand. I had mentioned to her about . . . death. She made me realize that I had to think of Kelly as dead . . .the Kelly that I had wanted was dead, and I had another Kelly and we should go on from there. She got me involved in this Kentucky Deaf-Blind Program.

Since then Kelly and I have grown a lot. Kelly appreciates me caring enough about her to be involved. She knows that standing here in front of your telling all of these things is very difficult for me. She appreciates that I am here telling you about our experiences and hoping that other parents who are going through the same difficulties will finally realize that life does go on and that we can still have a quality life."

PROJECT UPDATE:
Personal Futures Planning for Individuals with Deaf-Blindness

A process manual is in the final stages of development with the assistance of Beth Mount, Ph.D., New York, who is nationally recognized for her efforts in helping individuals and families plan quality futures. Dr. Barbara Wilcox, Indiana University, is assisting the project in the evaluation of the P.F.P.'s (Personal Futures Plans) developed thus far and the impact these plans have on student's I.E.P., especially transition services.

Orientation training, through a combination of approaches has reached 410 persons. Approximately half or 195 of these persons have directly participated in PFP teams and have applied their knowledge in activities of direct benefit to the participants in this project. Personal Futures Planning team meetings have been facilitated with nine teams. Seven of these teams, presently functioning, have received local consultation in the development of the IEP, especially the transition aspect. A minimum of two consultants has been used for five of these seven teams. Consultants are chosen on the basis of their expertise in specific areas of the Personal Futures Plans.

As a part of the parent mentoring aspect, we have contacted and set up parent alliances when possible. For example, one parent agreed to share her vision with another family who had never seen persons with significant disabilities working in the community. A skeptical family member was able to ask questions and visit community work places which included persons with disabilities. Changes in values, based on being exposed to more integrated community settings, helped this family to believe that their young adult could have a quality life in a positive location in the community for his future.

MARK YOUR CALENDARS!!!

The (now) Annual Family Forum for families of children with dual sensory impairments will be August 14-16 at the Kavanaugh Center in Crestwood Kentucky (35 miles from Louisville). All families of children with dual sensory impairments are invited to this wonderful weekend of fun and learning. Expenses are paid for each family to attend through the Hilton/Perkins National Program. Watch for additional information in the next issue of Insight.

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	⑭	⑮
⑯	17	18	19	20	21	22
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BEST COPY AVAILABLE

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NATIONAL PARENT NETWORK ON DISABILITY (NPND), Alexandria, Virginia. Help to apply, in behalf of your child, for Supplemental Security Income (703)684-6763.

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SKI-HI Help for parents with young hearing impaired children Andy Hensley (606)357-7939.

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PARENT DIRECTORY

Included within this issue of INSIGHT is a directory of parents who have children with dual sensory impairments and have consented to having their names and numbers disseminated to all families with children on the Deaf/Blind Registry. Take a few moments to glance through it and locate other families in your area. Perhaps, you may want to contact these families if you have concerns or issues that you need to discuss with another family.

CRISIS LINE

NEW! HELP! TOLL FREE!

Call 1-800-365-3586 and "call forwarding" will take your call directly into the home of another parent who may or may not be in crisis also. We probably will not have the answers, but we have most likely had a similar crisis.

Beware! The following is an advertisement.

Attention! All Parents
In Attendance At
Last Year's Family Forum

For those of you who, along with your son or daughter attended our Otter Creek Family Forum, we have a 10 minute video treat for you.

If your son or daughter participated and you would like a copy of this event on VHS for eternity, Brenda Pezzarossi is able to make copies of the original "Spontaneous Integrated Adapted Kickball Game" that occurred on Saturday evening at Otter Creek's Family Forum.

Send $5.00 along with your name and address to Brenda Pezzarossi, 3428 Crimson King Ct., Lexington, KY 40517, who is willing to make copies of the tape, at your expense, of course. You may contact Brenda at 606-272-1992 at home or 1-800-365-1258 or 606-257-3586 at work.

FYI CORNER

Deaf Blind Intervention Program
Jennifer Leatherby
UK Special Education Department
229 Taylor Education Building
Lexington, KY 40506-0001
(606) 257-7909 *

Diane Haynes,Sandi Baker, and Marie Ruf
1867 Frankfort Avenue
Louisville, KY 40206
(502)897-1583 *

Helen Keller Affiliateship
Janis Friend
Dept of Vocational Rehabilitation
627 W 4th St
Lexington, KY 40408
(606)255-1431

Systems Change Project
Dr. Harold Kleinert or
Jacque Farmer
UK Interdisciplinary Human Development
114 Mineral Industries Building
Lexington, KY 40506-0051
(606)257-3045 *

Amy Reber
Associate Director
501 Farrell Drive
Covington, KY 41011
(606)331-7742 (wk) - (513)231-8454 (hm)

Personal Futures Planning Project
Carolyn Wheeler or
Cynthia Vaughn, Parent Coordinator
1867 Frankfort Avenue
Louisville, KY 40206
(502)894-9366 *

Brenda Pezzarossi, Parent Coordinator
UK Human Development Institute
114 Mineral Industries Building
Lexington, KY 40506-0051
(606)257-3586 or (606)272-1992 *

*Answering machines located on these phones

The Monitors Came!
The Monitors are Coming Again!

The United States Department of Education, Office of Special Education and Rehabilitative Services (OSERS), is responsible for visiting each state approximately once every five years to "monitor" whether or not the state education agency is meeting the requirements of federal law. A part of this process is to invite parents and disability/advocacy organizations to make comments that will alert the federal monitors to issues concerning implementation in their state.

Kentucky's two public meetings, held in Bowling Green and Lexington, were well attended in spite of severe weather warnings on the evenings of January 14 and 15. Many parents, representing a multitude of groups for persons with disabilities, were in attendance at the federal monitoring meetings. The OSERS staff person, Dr. Gregory Corr, 202-732-1027, seemed to value parent participation, and was extremely interested in the comments.

Protection and Advocacy, 1-800-372-2988, submitted the largest written documentation of noncompliance which addressed issues of "no school" with no services for school age children with special needs, "homebound" with minimal services for children with special health care needs, and instruction time being less for children with disabilities than for regular students.

Parents addressed many other educational issues, which occur even though P.L. 94-142 was enacted in 1975 and IDEA is the new law of the land. Concerns of parents, taken from federal oral testimony, are listed below:

- Children with disabilities being placed in one location because of administrative convenience, rather than their educational needs.
- Lack of training of principals, teachers, and guidance counselors in integration and equal rights leads to outright discriminatory practices against children with disabilities in many school systems.
- Children with disabilities being placed in "what is available" rather than basing the placement on the individual child's educational goals and objectives.
- Regular classroom modifications or adaptations not being offered to ensure success for the child with disabilities in the least restrictive environment.

Continued on Page 6

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- Related services such as occupational therapy, physical therapy not being provided, not considered educationally relevant, and not being placed on the IEP.
- School systems' continued refusal of parental requests for IEP goals or services.
- Parents not being encouraged, or actively discouraged, by the school system to be actively involved in writing Individualized Education Plans for their son or daughter.
- The lack of mandatory Interagency Individual Transition Planning for students with disabilities after they reach age 14.
- The lack of Assistive Technology services for students with documented communication needs for these services.
- Proper implementation of school services depending upon parent contacting P & A; consequently, unequal service delivery for students with disabilities across the state, across districts, across local systems, and even among students in the same local school system.

During the week of February 24, 1992, the monitors will be making on-site visits to five local school districts in Kentucky. Results will return to Kentucky in the form of a report which will reflect the issues and comments brought to the attention of the monitors by the parents throughout the state. Parents and children with special needs will begin to notice some positive changes.

Parents, your comments may be sent directly to:

Dr. Gregory Corr
Office of Special Education Programs
US Department of Education
400 Maryland Avenue, SW
Washington, DC 20202-2722
Tel: 202-732-1027

ATTENTION!!!

YOU MAY RECEIVE A COPY OF THE **AMERICAN DISABILITIES ACT** FROM THE AMERICAN PRINTING HOUSE FOR THE BLIND BY CALLING 502-897-1583.

✉ ✉ ✉ ✉ ✉ ✉

NEEDS ASSESSMENT

Attached is a needs assessment that has been developed for parents to let us know what information you need regarding your son/daughter's disability. Please take a few moments to complete this needs assessment and return it in the postage paid envelope that is included. The intent of the newsletter is to assist families in attending existing trainings specific to your needs. Information from the Needs Assessment may also be used to plan this year's Family Forum.

✉ ✉ ✉ ✉ ✉ ✉

TOLL FREE NUMBER

The Kentucky Support Network for parents confronting dual sensory impairments now has its own 800#. The new phone line is located in Jennifer Leatherby's office at U.K. There is an answering service on the line, so if Jennifer is unavailable, please leave a message and she will return your call. Feel free to leave messages for other staff of the Deaf/Blind Intervention Program on this number, as well. The number is **1-800-999-4910**.

CALENDAR OF EVENTS

If you want to know more about the **CONFERENCES** listed, please call the contact person listed below.

2/19 - 2/21: Social Role Valorization Workshop in the awareness of life's value, Lake Cumberland Leadership Training Center, Carrie Stith 606-257-5389.

3/1 - 3/6: PASSING, A week long workshop of training to evaluate services for persons with disabilities, contact Carrie Stith, 606-257-5389.

3/13 - 3/15: Parent/Professional Conference, $20 due to NKCES (Northern Kentucky Cooperative for Educational Services), Holiday Inn, Erlanger, KY. Contact: 606-525-8121, Sandy Teeters, 3573 Ridgewood Dr, Erlanger, KY, 41018. **THE DEAF/BLIND INTERVENTION PROGRAM CAN PAY EXPENSES FOR PARENTS TO ATTEND THIS CONFERENCE** contact Jennifer Leatherby 1-800-999-4910.

3/21 - 3/25: National conference on Deaf Blindness, Washington, D.C., contact Jennifer Leatherby 1-800-999-4910.

3/26 - 3/28: State of Kentucky C.E.C. (Council for Exceptional Children) Conference, contact Linda Elford, Campbell County Schools 606-635-2173.

4/24 - 4/26: Consumer Conference Adolescents and Young Adults with Ushers Syndrome, Holiday Inn at Hurstborne Lane in Louisville, KY. for additional information, contact Marie Ruf 502-897-1583 or Janis Friend at 606-255-1431 ext. 373. **4/25:** (in conjunction with Consumer Conference) Parent Advisory Board Meeting 1:00 to 3:00 p.m.

5/15: Consumer Workshop, Cincinnati, Ohio: contact Patty Conway, ext. 7475 at Support Services for the Deaf, Vocational Rehabilitation, 1-800-372-7172.

8/14 - 8/16: Family Forum, Kavenaugh Center, Crestwood, KY, contact Jennifer Leatherby 1-800-999-4910 or 606-257-7909.

Usher's Syndrome
Toll Free Information Resource

Usher's Syndrome is an inherited disorder characterized by hearing loss, present at birth or shortly thereafter, and a progressive loss of vision. The loss of vision is caused by (RP) retinitis pigmentosa, a degeneration of the retina. The retina lines the inside of the eye and acts like the film in a camera, receiving and processing what you see.

Many people with Usher's syndrome are born with profound deafness, while others have a mild hearing loss. In the overwhelming majority of patients, it appears that the hearing loss usually does not progress. One of the earliest visual symptoms is difficulty seeing at night and in dimly lit places. Later there is a loss of side vision, resulting in "tunnel vision". The visual symptoms of RP generally worsen over a period of years. Usher's Syndrome is often diagnosed in children and young adults. By then, the individual has been dealing with the hearing loss for some time.. Some may experience complete loss of sight later in life; however, many retain at least some residual vision, but have "legal blindness".

While there is currently no way to halt the degeneration of the retina or to restore normal hearing, some individuals with Usher's benefit from cochlear implants. Individuals should consult a neuro-otologist to determine whether or not they are candidates for this procedure. Those who have any degree of usable hearing with hearing aids are typically not candidates for the cochlear implant.

An accurate diagnosis of the hearing and vision loss is important. It should include audiometric tests, as well as special electrodiagnostic tests of retinal function, visual field and a thorough ophthalmological examination. A person with Usher's Syndrome can learn to cope with the vision problems by using a wide variety of low vision aids, reading machines, sunglasses, and talking computers. Dealing with the hearing loss may involve learning sign language or other communication skills and using hearing aids.

Information about Usher's Syndrome and resources for individuals with hearing and vision losses can be obtained from:

R. P. Foundation
1401 Mt Royal Ave., 4th Floor
Baltimore, MD 21217
1-800-683-5555 or 410-225-9409 (TDD)

Brothers and Sisters

Hints for Parents

The presence of a child with a disability in the family does not necessarily have a negative effect on siblings. This is according to Dr. Peggy Ogle and Dr. Thomas H. Powell in their book titled Brothers and Sisters. Children adjust well to the extra responsibilities and inconveniences that can occur when there is a child with a disability in the family, if given the opportunity to live in an open, honest and nurturing atmosphere. In fact, there is some evidence that siblings of children with disabilities who have been raised in an understanding environment demonstrate greater maturity, sensitivity, and resilience than the general population. Many eventually enter helping professions like medicine, teaching, and counseling.

Here are some suggestions for supporting siblings:

1. Encourage brothers and sisters to observe their sibling with a disability in therapy or special education class.
2. Don't overindulge siblings without disabilities in order to make up for the fact that they have a sibling with a disability.
3. Don't expect children to accept adult roles, particularly in caring for the child with a disability.
4. Set reasonable expectations for all of the children in the family and don't expect the children without disabilities to excel in order to compensate for the child with a disability.
5. Expect sibling rivalry . . . there will be jealousy and that is normal.
6. Do your best to integrate the whole family into activities early such as church, sports, music groups, and civic organizations.
7. Don't imply that children without disabilities have a lifetime responsibility to care for their brother or sister with a disability.
8. Network with another family who has a child with disabilities and whose siblings you admire.

For information, write to the following:

Siblings Understanding Needs (SUN)
Department of Pediatrics
University of Texas, Medical Branch
Galveston, TX 77550

Siblings for Significant Change
823 United Nations Plaza, Room 808
New York, NY 10017

Sibling Information Network
Department of Educational Psychology
Box U-64 University of Connecticut
Storrs, CT 06268

This newsletter is supported, in part, by the Hilton Perkins National Program of Perkins School for the Blind, Watertown, Massachusetts. The Hilton/Perkins National Program is funded by a grant from the Conrad N. Hilton Foundation of Los Angeles, California.

The following quote, which can apply to all persons with significant disabilities, was taken from a book written by a native Kentuckian:

> "No joy runs deeper than the feeling that I have helped a youth stand on his own two feet, to have courage and self reliance, and to find himself when he did not know who he was or . . . . where he was going." by Jesse Stuart

I N S I G H T

Reach for the Stars

Volume 3 Number 2 | Jennifer Leatherby, Editor | Summer 1992
Brenda Pezzarossi, Parent Coordinator

It's Fathers Day!

More Fathering When You Are The Father of a Child with Disabilities

What is it like to be the father of a child with disabilities? Is this experience different because you are male? Why is it so demanding? What feelings are associated with drastic changes? Why is it so difficult? These questions can only be answered individually by each father and are probably different for each, but history and society have made many experiences more difficult.

The ways men approach the demands of parenting has changed incredibly during the past 20 years. Fathers are now present in the birthing room and during delivery on a routine basis. The family breadwinner was once the only role of the father. Roles of fathers, once limited, now extend to child caretaking tasks and responsibilities. Glenn Dearing must constantly balance his full-time job with his wife, Linda's job so someone can stay home to keep Chad, one of the youngest children on the state's Deaf/Blind census. Increasing numbers of men are choosing to stay at home while their wives pursue full-time employment.

Society instills in almost all men the notion that they must be strong, in-control, protective, competitive, rational, and be able to solve all problems. Their stories differ, but all share the theme of the strong man's craving to feel more dominant. We still read about it in the newspaper story lives of sports heros like Magic Johnson, and Muhammad Ali, and the late Lyle Alzado.

There may be nothing inherently evil about the role of the male as strong man, however it does not work well when you have a child with a disability. Research indicates that the divorce rate hovers around 85 percent when the family must cope with chronic disability of any kin The pressure of concealing pain and weakne ultimately crushes the soul of even the stronge man. Dads can no longer protect their fami from problems or control outcomes. A father self-sufficiency often means they do not kno what to do with the powerful feelings that rag inside them.

The intense stress in the family of a child with disability can leave a father depressed, wea guilty, powerless, and very angry. A father self esteem may be at risk. The man's dreams namesake, ego fulfillment, athletic, and care achievement, are all threatened. Even fathe who are quite uninvolved with their children w feel the loss more profoundly than men tw generations ago.

The needs of all family members are in balanc with each other. These needs are complicate interdependent, and in constant change. Havin a child with a disability changes the balance an places extreme constant pressure on the famil Communication becomes strained and financ may be reduced. Outside help and eve assistance from relatives may be limited. A family members may feel isolated and neglecte Research indicates that fathers of children wi disabilities have universal feelings of failure an guilt. For many men, it is difficult to accept th reality of the situation. Men who may hav gotten pleasure from athletics, may b embarrassed by their child's physical appearanc or lack of development.

Many fathers of children with disabilities ar discovering they don't need to be limited by wha they "should" be. They gain an understanding o the importance of bonding with all their childre Cheryl, the daughter of Ruldolph Spink, believes that her close relationship with her fath is due, in part, to her brother's severel handicapping condition.

Some men still have limited perceptions of th roles they can play regarding their children.

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However, these roles take on new meaning if the child has a chronic illness or a disability. Bob Moore, whose 10 year old son has Cerebral Palsy, mental retardation, and chronic health-care needs, has redirected his life into making legislative changes. Being the father of a child with disabilities may dramatically change your philosophy of life if you choose to recognize its value. A father may choose to accept the realities of the problems at hand, and become an active problem-solver for their child's needs.

Changes are made, but not without stress and confusion. Men are being confronted with inadequate role models, a lack of child-rearing information and education, and a set of values needing change. Fathering is an old game, now played with new rules. When you are the father of a child with disabilities, there has to be more fathering. The fathers that stick with this really find the true meaning of being a father. Congratulations, fathers!

Advice from Famous People

"The greatest thing a parent can give their child is freedom. . . . "**Stevie Wonder**

"While they were saying among themselves, 'it can not be done, it was done'. . . "**Helen Keller**

"Keep your face to the sunshine and you won't see the shadows. . . "**Helen Keller**

"Every human being has undeniable rights, which respected, render happiness possible - the right to live his own life as far as may be, to choose his own creed, to develop his capabilities. . . "**Helen Keller**

REMEMBER....
MARK YOUR CALENDARS!!!

The Annual Family Forum for families of children with dual sensory impairments will be August 14-16 at the Kavanaugh Center in Crestwood, Kentucky (35 miles from Louisville). All families of children with dual sensory impairments are invited to this wonderful weekend of fun and learning. Expenses are paid for each family to attend through the Hilton/Perkins National Program. See **enclosed registration form and return it as soon as possible.**

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Different Is Good!

by Brenda and Arby's

After buying a soft drink last week, I had one of my rare profound thoughts. Apparently, the Arby's high corporate executives must now be the parents of a child with disabilities.

Arby's new plastic cups say, "DIFFERENT IS GOOD". They count the ways you can eat different fast foods. They ask, 'How to be different'? Their plastic cup lingo says, 'burgers are the same - Arby's is different. Hey! Different is Good!'

As the parent of a child who is viewed as different, maybe I should go into advertising. There is certainly a need to sell my product to the public schools, where my child needs to be successful at learning differently.

Businesses definitely have a long way to go before my product can be equally employable.

Continued on Page 3

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Maybe I need to sell my product, with a catchy slogan, to the business world, where this aspiring young adult will need to be viewed differently. Let's advertise. Hey! Different is Good! Who has the patent for this? Don't we? We were different first!

Excerpts from A Personal Futures Planning Project Interview conducted by Brenda Pezzarossi

Words of Wisdom

by Sylvia Shacklette

"To tell about James, it'd be a long story. It'd be a book. I think I could write a couple of books, a book on nursing and a book on this. People should really know what 'supposedly educated professionals' say to parents when they have a handicapped child. They might not do it now, but I know they have done it before."

"I've been told things like, 'He's retarded!', 'Put him in a home.', 'He'll never be able to put his clothes on.' 'He'll never be able to tie his shoes.' 'He'll never be able to do anything.' 'He'll just be a vegetable.' 'You'll get a check for him, so you shouldn't worry about trying to educate him and send him to school.'"

"I've been through all kinds of stuff like that, from the time he was a little baby, by and from educated, professional people."

"I'll never forget when he was a little eighteen month old baby, sitting in the middle of the floor, playing . . . with whatever he could touch because he couldn't see anything then either. One of them told me and I'll never forget it (she was going to be a professor at the University of Louisville) and she said, 'Oh, Oh, he's retarded!' James couldn't see or he couldn't hear and he was sitting in the middle of the floor. What is he going to do? Get up and write a book? I thought, 'this woman is crazy!' She didn't even touch him, didn't examine him or nothing. . . just told me he's retarded. 'He's going to have to be put in a home. He will never do this and he'll never do that.'"

"If you take a child who is not retarded and put him in an environment. . . with only children who are retarded, he is going to do just what the other children doing. I said, 'no, James is not retarded! He is a deaf and blind child.' I want to forget about it. I just want to forget about it. At least, that's the way I feel!"

"We've always tried to treat James just like anybody else. He's not handicapped to us and he isn't handicapped to himself, because he doesn't know it any different. When he needed a spanking, he got it. When he needed to sit in a corner, he got it . . .just like the other children. I didn't make different care or treatment for him. Because of that, he is like he is."

"I don't feel that I could do any more, any better than what I have already done. I brought him along doing things when they told me he was a vegetable. There is nothing anyone can say about what I did for him because I have already done it. . . me alone. What I do for him or what I do with him is a continuation of what I have have been doing. There are no extras. It is just what I have been doing all along."

"James doesn't communicate, but you can look at his facial expressions and tell how he feels. If he has a glum look on his face then I know he wants to leave the room. If you're going to go with me, you have to accept James. I never let anybody say a 'poor little this or poor little that' about him. When he can't go, I say, 'This time we'll watch it on television, pop some popcorn, and make some punch and maybe next time you can go.' James understands. He is very independent. That's a good way to raise him, as independently as possible."

"When I was younger and kind of shy, I wouldn't speak out. But now, I don't care what it is. . . if he has a fingernail broken and I don't know how it happened I say, 'Hey, come here, James got his fingernail broken, could you tell me how this happened?' Being outspoken is better than standing back waiting and listening."

"It's a lot better now. They're doing a good job with him. Now he is just leaping! I want what is best for James. Whatever comes, whatever happens . . . we'll just take one day at a time. You can not plan on a whole lot for the future because it might not go right. We mostly just plan 'one day at a time' and see how that works out and we go on from there."

Personal Futures Planning Meetings

(Some of Sylvia's thoughts)

"Each time we go, they (the meetings) get better and better. All his teachers are there and everyone who works with James is there. We just have good meetings. I can't find any fault with them right now at all. It couldn't be any better. We enjoy each others' company. We all get along.

Concerning other meetings, very few meetings are pleasant. You dread going and you dread being there and you're glad to leave. With our futures meetings, we all communicate with each other. There is something **"alike"** there. You have to be there to feel it and see it to know what's going on. It is just nice and I look forward to going to them. I look forward to seeing all the teachers and greeting each other. It is just pleasant.

We suggest different things that we feel will be beneficial to James. They are written on the board and we either agree or disagree with them. We all finally agree on them; if we don't agree then they're erased off. We don't plan a whole lot of things. It is just a few things at a time that we feel James can accomplish.

Each person has their own thing that they do. They communicate between each other about what you are doing and what they are doing and what I am doing, so that everyone knows what everyone else is doing. Let them continue working as they are with me because I think it is beautiful."

* * *

Selected Parent Quotes

"Parents are the first teachers of their children."

"Parents are the long lasting resource and the only consistent persons who continually have their child's interest at heart throughout their lifetime."

"Carry a brief case, have a list of questions and dress like you are going to an interview even though it's an IEP."

"There is no right or wrong way to teach your child independent living skills."

"Feelings of anger and frustration may never go away, but you can find a different and rewarding focus."

SOURCE: NAPVI, 2180 Linway Dr., Beloit, WI 53511

✆ CRISIS LINE

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LETTER TO PARENTS

by Stephanie Hallum

Dear Parents,

I am hard of hearing and my left ear is deaf and my right ear is good with a hearing aid and not without it. When I am wearing my left ear hearing aid, I can hear some, but I can't understand people who are talking. I am going to tell you how a deaf parent can raise hearing kids.

When I have a baby, how would I hear the baby cry at night or during the day? During the day, I will use a monitor with high volume. At night, it is easy because the cry alarm and the light will flash on and off. It will wake me up.

How could kids know how to talk? When the baby turns one year old, ask some family member who will work with the kids. When you take them to day care, the day care worker will work with them. Ask someone who can talk and sign. For example, I have a great aunt who is deaf and she had a hearing daughter. My aunt's mom and my aunt worked with my cousin (my aunt's daughter). My aunt's mom taught her to talk and my aunt taught her to sign.

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There are many people asking me, "Can deaf people drive? Yes, people who are deaf can drive. But they can't hear? All they have to do is to use their eyes and they have to look at the car mirror all the time to see the car behind. What is the police came and the light is on? Deaf people have to look at the car mirror lots more than hearing. But they can't hear and must use their eyes.

How do deaf people communicate with people? They had to write me on paper and give it to people who they are talking with on the paper. Deaf people have to write with good English.

Deaf people can get jobs, drive, do many things. I would like to show you how I can know my deaf friends. Before I learned the sign language, my friend's name was Dara. She and I had to write because I couldn't sign yet. Here is what Dara and I were talking on paper.

Hi! My name is Stephanie. What is your name?

My name is Dara and I'm glad to know you. I will teach you to sign. I know lots of it. So do you want to learn?

Sure, I would like to because lots of my friends are deaf. I don't want to write all the time.

I agree with you.

See, that is so easy to write unless you know the signs. I started going to KSD when I was seven years old and didn't know the sign language until I was nine years old. But my speech was not very good. Now I am eighteen years old and I am improving my speech because I am in KSB now. I am very happy here at KSB, but I do miss KSD.

Well, if you have any questions about deaf people, please let me know. I will be happy to answer your questions. But I may not know all the questions. I will try to answer. Well, bye for now.

Sincerely,
Stephanie Dawn Hallum

FYI CORNER

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(606)257-3586 or (606)272-1992 *

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PARENTS, YOU CAN HELP MAKE SCHOOL DECISIONS!

Welcome to the team! Educators have known for a long time that children do better in school when parents are involved. Now KERA, Kentucky Education Reform Act of 1990 makes parents full partners in the improvement of education. Your local school will become the place where most school decisions will be made.

This new KERA management process is referred to as 'School-Based Decision Making'. It is also called a school council and/or site-based team management. By June 30, 1991, each school district must have at least one school using this team management. All schools in our state must be managed by school councils by July 1, 1996.

The Kentucky Education Reform Act sets each school council membership at six: the principal, three teachers (elected by teachers) and two parents (elected by parents). Schools can design a different structure for their council membership, but only with permission from the state department. For example, a larger school might choose to double their council to twelve members.

Parents, especially those of children with disabilities, must be involved so the school doesn't leave them off the team. There are only two parent openings for each school council. No spot is designated on the council for parents of children with disabilities.

Parents of children with disabilities can help make school decisions. In order to be eligible to be elected to the local school council, parents of children with disabilities must become active in their local PTA. What if you're too tired? Find respite care and set aside the PTA night to make your school better at offering a good education for your child.

For more information, contact Bill Stearns, Division of School-Based Decision Making, 18th floor, Capital Plaza Tower, Frankfort, KY 40601, (502) 564-4201

SOURCE: FOCUS on Diverse Learning Needs, Feb. 1992

ATTENTION!!!

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* * *

Repeat on the NEEDS ASSESSMENT

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The Kentucky Support Network for parents confronting dual sensory impairments now has its own 800#. The new phone line is located in Jennifer Leatherby's office at U.K. There is an answering service on the line, so if Jennifer is unavailable, please leave a message and she will return your call. Feel free to leave messages for other staff of the Deaf/Blind Intervention Program on this number, as well. The number is **1-800-999-4910**.

Parents Confronting Dual Sensory Impairments (PCDSI)

The Founding Committee includes the following individuals: Sharon Cole, Marna Miller, Jennifer Leatherby, Brenda Pezzarossi, Cecelia Snellen, Bob Moore, Glen Dearing, Margarita Arnett and Greg K. Whittington.

For further information call 1-800-999-4910.

CALENDAR OF EVENTS

If you want to know more about the CONFERENCES listed, please call the contact person listed below.

June 4-5: **Best Practices Annual Conference** - "Supporting People in the Community", Campbell House, Lexington, KY, contact Carrie Stith 606-257-1714.

July 13-17: **Summer Institute** - "Issues Regarding Students with Dual Sensory Impairments", Springs Inn, Lexington, KY, contact Jennifer Leatherby 1-800-999-4910 or (606) 257-7909.

August 14, 15, & 16: **Family Forum**, retreat location near Louisville. contact Jennifer Leatherby 1-800-999-4910 or (606) 257-7909.

Sept. 17 & 18: **KAAMR/KY TASH** Fall Conference, Holiday Inn South, Louisville, KY, contact Carolyn Wheeler (502) 894-9366.

Sept. 24 - 26: **Aging/MR SIG Annual Conference**, Lexington, KY, contact Jim Stone (606) 257-5244

HAPPY 4TH OF JULY

Kentucky Early Intervention System April Update

The Secretary of the Cabinet for Human Resources, Leonard Heller, spoke at the March 31st meeting of the Infant-Toddler Interagency Coordinating Council in Frankfort. He voiced his support and encouragement for interagency coordination and collaboration for services for Kentucky's children and their families.

A resolution sponsored by Senator Gerald Neal in the Senate and Representative Tom Burch in the House supporting Early Intervention was signed by the Governor March 31st. Anyone interested in that can get copies by calling 502-564-8100 ext 323 and asking for Senate Joint Resolution #67 and/or House Joint Resolution #94.

The Extended Participation Application is expected to be out for public comment April 15th. Your Regional MH/MR Board office will have copies. Please let state staff know if there's any problem accessing this application (502-564-7700). Hearings will be held to allow input.

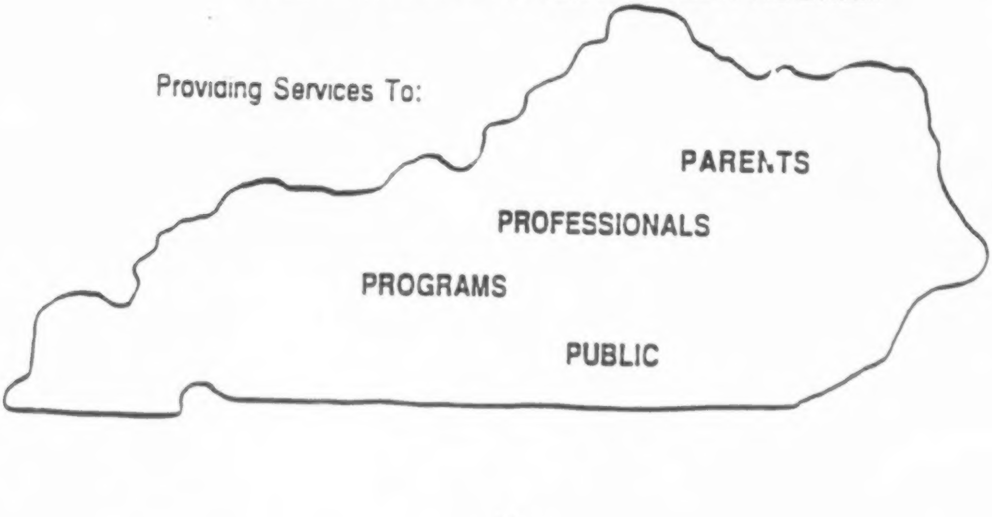
This newsletter is supported, in part, by the Hilton/Perkins National Program of Perkins School for the Blind, Watertown, Massachusetts. The Hilton/Perkins National Program is funded by a grant from the Conrad N. Hilton Foundation of Los Angeles, California.

Deaf-Blind Intervention Program
229 Tavlor Education Program
Department of Special Education
University of Kentucky - 00010
Lexington, KY 40506-0001

JENNIFER LEATHERBY
STATE COORD
UNIVERSITY OF KY
DEAF BLIND INTERVENTION PROGRAM
229 TAYLOR EDUCATION BUILDING
LEXINGTON KY 40506-0001

THE DEAF-BLIND INTERVENTION PROGRAM

Providing Services To:


PARENTS
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PARENTS CONFRONTING DUAL SENSORY IMPAIRMENTS

Reach for the Stars

Sponsored by Hilton Perkins Foundation

ATTENTION....ATTENTION

THE **800 NUMBER** HAS NOW BEEN INSTALLED.

If you need to contact the main office for any reason just dial 1-800-999-4910.

If there is no one in the office to answer your call, please leave a message on ***"Molly"*** our voice mailbox and your message will be handled as soon as possible.

THANK YOU

JANUARY 30, 1992

CINDY L BAIRD
210 W 5TH ST APT 4
OWENSBORO KY 42303
no phone at this time
BRADLEY RYAN BAIRD 6 years old

LARRY & DORIS BECKETT
RT 2
MT OLIVET KY 41064
(606) 724-5664
KEVIN BECKETT 16 years old

SAMUEL & SHAWNA BEICHLER
9013 ARIA DR
LOUISVILLE KY 40219
(502) 969-0278
BROOK BEICHLER 4 years old

TOM & FRANCINE BONNY
1549 WISEMANTOWN RD
IRVIN KY 40336-9343
(606) 723-5694
TARA ELIZABETH BONNY 4 years old

PEGGY BRASHER
PO BOX 621
NORTONVILLE KY 42442
(502) 676-8665
JACKIE BRASHER JR 17 years old

JULIE A BROYLES
3906 ACCOMACK DR APT 10
LOUISVILLE KY 40241
(502) 423-8369
SARA BROYLES 6 years old

RUTH CALDWELL
GENERAL DELIVERY
ROARK KY 40979
(606) 598-8637
SHANNON CALDWELL 16 years old

RAYMOND COCHRAN
BOX 1275
HAZARD KY 41701
(606) 439-5104
MICHAEL COCHRAN 18 years old

SHARON COLE
RT 2 BOX 15-A
FORDSVILLE KY 42343
(502) 276-3306
KELLY PHELPS 14 years old

MARY ANN CONDER
R 1 BOX 192A
FINCHVILLE KY 40022
(502) 722-5569
MICHAEL CONDER 16 years old

BILLY & WANDA COOMER
156 QUICK-SHOP
WINCHESTER KY 40391
(606) 744-9318
ANDREA COOMER 2 years old

BRENDA COX
856 LYLESVILLE ST
PARIS KY 40361
(606) 987-8346
SHARI FRYMAN 18 years old

GLENN & LINDA S DEARING
111 GARY CT
WINCHESTER KY 40391

(606) 745-2316

J G (Chad) DEARING 2 years old

ALLEN & SUE ELLS
9135 B BUTLER CT
FORT KNOX KY 40121

(502) 942-8515

AMANDA ELLS 3 years old

RUTH EVANS
PO BOX 1743
HENDERSON KY 42420

(502) 826-8911

NICK COSBY 5 years old

LINDA G HALL
106 BROADWAY ST
SOMERSET KY 42501

(606) 679-2709

ASHLEY DAWN HALL 6 years old

TERESA JUSTICE
409 LOWER CHLOE RD
PIKEVILLE KY 41501

(606) 432-3666

JONATHAN R JUSTICE II 8 years old

JOHN T & THERESA R KING
7B HARRY SMITH APARTMENTS
OWENSBORO KY 42301

(502) 684-2135

AMANDA KING 8 years old

CALVIN & BETTY KING
2701 WILMORE RD
NICHOLASVILLE KY 40356

(606) 885-3043

RACHEL L KING 18 years old

MICHAEL & REVA KING
PO BOX 63
VANCLEVE KY 41385

(606) 666-8737

MICHAEL G KING 10 years old

KARLA J LANCASTER
PO BOX 1282
HOPKINSVILLE KY 42241-7282

(502) 885-2648

HEATHER LANCASTER 6 years old

SUSAN WOLF LAURENCE
7723 MACKIE LN
LOUISVILLE KY 40214

(502) 368-6159

MICHAEL LEO SOEDER 11 years old

PAULENE LEWIS
1612 S LAUREL RD
LONDON KY 40741

(606) 864-7643 or 864-2076

WHITNEY NOEL LEWIS 4 years old

JO ANN LOVELY
8930 CRANSTON RD
MOREHEAD KY 40351

(606) 784-6577

DARAH JO LOVELY 16 years old

MARNA L MILLER
4905 GARDEN GREEN WAY
LOUISVILLE KY 40218

(502) 454-7340

SEAN D MILLER 19 years old

DENNIS & LINDA MONTGOMERY
5707 MORGANTOWN RD
BOWLING GREEN KY 42101

(502) 781-9815

JOSEPH (JOEY) 9 years old

EVA LOUISE NEWTON
506 HARDING ST
BARDSTOWN KY 40004

(502) 348-9712

TIMOTHY HOBBS 10 years old

SHARON G NOEL
R# BOX 137A
SMITHLAND KY 42081

(502) 928-2934

CRYSTAL NOEL 10 years old

SHIRLEY POINDEXTER
9924 OMAR KHAYYAM BLVD
LOUISVILLE KY 40272

(502) 937-0773

TAMMY ANN CHAVIES 19 years old

NANCY E RIDDLE
115 BROOKFIELD LN
FRANKFORT KY 40601

(502) 227-0063

JAMIE M RIDDLE 17 years old

CAROLYN ROBERSON
5532 RIDGECREST RD
LOUISVILLE KY 40218

(502) 969-1613

JOSHUA ROBERSON 9 years old

LARRY J & FLORA L SANDAGE SR
RT 1 BOX 673
LEWISPORT KY 42351

(502) 927-9046

LARRY SANDAGE JR 9 years old

LOTUS L SCHILLER
1574 CATALPA RD
RADCLIFF KY 40160

(502) 351-4068

KIM SCHILLER 21 years old

JAMES W & SYLVIA SHACKLETTE SR
1601 PRENTICE ST
LOUISVILLE KY 40210

(502) 581-0035

JAMES SHACKLETTE JR 18 years old

JAMES & ANDREA SIPES
127 ABUNDANCE DR
SHEPHERDSVILLE 40265

(502) 957-2800

KIMBERLY ELLEN SIPES 9 years old

RUDOLPH & CYNTHIA SPINK
409 CONCORD DR
MT WASHINGTON KY 40047

(502) 538-7578

TOMMY SPINK 16 years old

CAROLYN STRAUSS
510 MAPLE AVE
DANVILLE KY 40422

(606) 236-1821

ABIGAIL STRAUSS 16 years old

LARRY & FLORA TACKETT
PO BOX 154
GRETHEL KY 41631

(606) 587-2803

LARRY CRAIG TACKETT 12 years old

HOMER TOLSON
RT 1
SHARPSBURG KY 40374

(606) 247-3402

AMY TOLSON 18 years old

BRENDA VANCE
PO BOX 108
BEAVER KY 41604

(606) 587-1096

STEPHANIE VANCE 7 years old

PATRICIA J WATTS
RT 3 BOX 296
MAYFIELD KY 42066

(502) 247-8877

WILLIAM DANIEL WATTS 11 years old

ANY NEW ADDITIONS

PHONE INFORMATION

People Concerned with Dual Sensory Impairment

A Public Directory

Published by

Parents Confronting

Dual Sensory Impairment

To add your name to this public directory, write, call, or fax your name, address, phone number, and reason for wanting to be included to:

PCDSI
Route 2, Box 15A
Fordsville KY 42343
(502) 276-3306
FAX: (502) 276-9516

1. Moore Robert W.
929 Wolf Run
Lexington KY 40504
606 255-1922 (h) or 233-5760 (o)

2. Cole Sharon
Route #2, Box 15A
Fordsville KY
42343

3. Knotts Malinda
PO Box 127
Milton KY 40045
no phone

4. Bowman Ray
Doe Creek
South Irvin KY 40336
606 723-7705

5. Spink Rudolph
409 Concord Drive
Mt. Washington KY 40047
502 538-7578

6. Browning Brenda

606 742-3293

7. Miller Marna

8. Pezzarossi Brenda

Lexington KY

9. King Cherry
1823 Old Harrodsburg Road
Lawrenceburg KY 40342
502 839-7556

10. Leatherby Jennifer
Kentucky Deaf-Blind Intervention Project
229 Taylor Education Building
University of Kentucky
Lexington KY 40506-0001
606 257-7909

11. Kleinert Harold
114 Mineral Industries Bldg
University of Kentucky
Lexington KY 40506-0051
606 257-3045

12. Dearing Glenn

13. Lanier Robin

502-444-7579

14. Lewis Preston
Kentucky Department of Education
Capital Plaza Tower
Frankfort KY 40601
502 564-4970

15. Haynes Diane

502 897-1583

16. Baker Sandra

Louisville KY

17. Ruf Marie

18. Friend Janis
Department of Vocational Rehabilitation
Frankfort KY 40601

19. Snellen Dale
University of Kentucky

20. Moore Prudence
Developmental Disabilities Council

21. Murphy Pat

22. Bensinger Sharon

23. Brennan Robert

Louisville KY

24. Perreault Steve
Perkins School for the Blind
175 No. Beacon Street
Watertown MA 02172

Developing Programs for Students with Severe Handicaps
Using Basic Skills in the Context of Age-Appropriate Priority Activities

Melissa E. Hudson
Kentucky Systems Change Project
Jennifer L. Leatherby
Deaf-Blind Intervention Project
University of Kentucky

Draft

RUNNING HEAD: EMBEDDED SKILLS

Abstract

Developing an individualized education plan that meets the unique needs of each child is a challenge for all special education teachers. IEP development for students with severe handicaps and/or dual sensory impairments is especially challenging because the IEP must address the student's many instructional needs. Within the framework of the ecological model, age-appropriate and longitudinally relevant activities have been used to successfully teach many functional skills to students with handicaps. To a degree, particial participation and adaptations have allowed some students with the most severe handicaps to participate in priority activities. All to often, though, students with the most severe handicaps are observers of the activities in the classroom and in their community. To meaningfully involve these students in activities, basic skills must be taught in the context of age-appropriate priority activities.

Developing Programs for Students with Severe Handicaps
Using Basic Skills in the Context of Age-Appropriate Activities

For both students with and without handicaps, the success of an educational program can be measured across three dimensions: (1) productivity, (2) independence, and (3) participation (Wilcox & Bellamy, 1982). As teachers of students with moderate and severe handicaps, our goal is to develop instructional programs that enable students to be productive in their community, to do as many everyday activities as independently as possible, and to participate meaningfully in their communities.

Generally accepted best practices for teaching students with moderate and severe handicaps are described in the literature (Falvey, 1985; Brown, Branston, Hamre-Nietupski, Pumpian, Certo & Gruenewald, 1979; and Wilcox and Bellamy, 1982), including teaching age-appropriate activities using functional, real-life materials in natural environments where the skill is likely to be needed, using functional and chronologically age-appropriate assessment and curricula, addressing transition needs throughout the school years, teaching skills that enable the students to participate in a number of integrated environments, and using the principal of particial participation and individual adaptations to involve students in priority activities.

Developing an individualized education plan for students with the most severe handicaps and dual sensory impairments is a challenge for teachers. Students with the most severe handicaps are the students who have inconsistent or no motor movement, little or no easily recognizable communication skills, who appear to possess very low IQs (e.g., below 15), or who are described as "medically fragile" (Brown, Helmstetter, & Guess, 1986). "Students with the most severe handicaps" alsodescribes students with dual sensory impairments (i.e., deaf-blindness) or students with severe/profound mental retardation and an additional handicap (i.e., cerebral palsey).

The ecological model has been described in the literature as a model for developing programs for students with moderate handicaps (Brown, 1979; Brown, Falvey, Vincent, Kaye, Johnson, Perrara-Parrish& Gruenewald, 1980). Within the ecological model, students are taught the functional skills necessary to participate as independently as possible in their own communities using age-appropriatate meaningful activities. Instruction occurs in four integrated domains (e.g., domestic, community/school, recreational/leisure, and vocational). Because the ecological model works from the premise that students will be able to compete all or most of the steps of the functional activities identified independently (i.e., crossing the street, taking a bus to the mall, making small purchases at a store), programming for students who cannot complete all, most, or even any of the steps of the activity independently does not easily occur.

In order to involve students with the most severe handicaps in the priority activities identified as important within the four instructional domains, several adaptations to the ecological model have been described. Helmstetter (1989) describes a process of using the principal of partial participation (Baumgart, Brown, Pumpian, Nisbet, Ford, Sweet\, Messina & Schroeder, 1982) and individual adaptations to involve students with severe handicaps in priority activities. The principal of particial participation affirms that it is worthwhile for students with severe handicaps to be particially involved in priority activities. Particial participation is accomplished through individual adaptations. After priority activities are selected and task analyzed, the student performs the activity in the natural environment and the steps the student cannot complete independently are noted. The teacher decides to teach the steps of the activity the student cannot complete independently or to adapt the step in some way (e.g., change the rules, change the sequence, use personal assistance, change other persons' attitudes, and/or use special equipment).

The principal of particial participation within the context of age-appropriate, priority activities and the use of individual adaptations is an improvement over past strategies used to determine what to teach and how to teach it. Historically four strategies have been used: (1) the all or nothing hypothesis (i.e., students must be able to complete all of the activity before becoming involved); (2) the developmental age hypothesis (i.e., students will learn best using activities and materials appropriate to their developmental age); (3) the independent performance hypothesis (i.e., if a student doesn't have a resonable chance of completing in the activity independently, don't teach it); and (4) the prerequisite skill hypothesis (i.e., the student is not ready to learn the skill yet) (Brown, etal., 1982)

Black and Ford (1989) describe a slightly different approach for developing curricula for students with the most severe handicaps called the activity-based lesson planning format. After priority activities have been selected from the four instructional domains, the initial assessment is done in the natural environment to determine what to teach, possible adaptations, possible instructional cues, and a baseline performance. The activity is then broken into component steps. The degree to which component steps are broken depends on the needs of the student. For example, a student with severe mental retardation and physical disabilities might need the grocery shopping step of "Locates/obtains basket" broken into more detailed steps (i.e., looks toward basket, reaches toward basket, grasps basket, pulls onto lap, releases grasp). Look, reach, grasp, pull, and release are the tool movements or basic skills the student needs to do in order to complete the component step of "locating the basket". When component steps are broken into the tool movements or basic skills the student needs to do to complete the component step, the focus of instruction is on the basic skill rather than on the completion of the component step.

Another strategy for involving students with the most severe handicaps in priority activities is described by Holvoet, Guess, Mulligan, and Brown (1980). Within the individualized curriculum sequencing model, behavioral clusters are taught in the context of age-appropriate, functional activities, rather than teaching skills in isolation. "Loose training" (i.e., selecting a variety of materials, cues, and persons conducting training) (Stokes & Baer, 1977) is recommended for enhancing generalization. Distributed trial training (i.e., other tasks are taught inbetween trials) and concurrent task sequencing (teaching all component parts of the task simutaneously) are used for training formats. For example, a student may be working on holding his head up, grasping, releasing, and communication (distributed trials) within the functional activities of tying a shoe, going through the lunchline, working in art class, and preparing for home.

The purpose of using the principal of particial participation and individualized adaptations is to involve the student meaningfully in the activity (Brown, etal., 1979). However, there may be a point when partial participation may have a negative effect for the student. Consider the following example. A person is personally assisted to complete nine out of ten steps of a ten-step vocational task. Is particial participation resulting in meaningful participation for this person?

In addition to using the principal of particial participation, the basic skills required to complete the component step of an activity must be taught, resulting in meaningful instruction for students. However, teachers are not trained to think of the process of task analysis in the context of basic skills. The purpose of this paper is twofold: (1) to describe a process for developing IEP goals and objectives from priority activities that lead teachers to program meaningfully for students with the most severe handicaps and (2) to describe a model in which embedded skill instruction in the context of age-appropriate activites occurs across the day.

The selection of priority activities in which to teach age-appropriate and longitudinally relevant skills is the first step in developing programs for students with the most severe handicaps. Teachers, alone, cannot identify all the activities that should be considered for each student. Family needs, parent expectations, peer activities, and critical social interaction skills, in addition to the activities the teacher identifies as important for instruction and the activities the student would select if s/he could, must be considered when selecting activities. The *Process for Selecting IEP Activities for Students with Severe Handicaps* (Hudson, 1990) describes a six-step process for identifying priority activities. First, the teacher interviews the parent(s) to determine parent expectations and family needs. Second, the activities parents want their child to learn are identified using an activity survey. Third, activities popular with nonhandicapped peers are identified using a peer questionnaire. Fourth, the activities important for instruction according to the teacher are determined. Fifth, critical social interaction skills needed by the student to be successful in targeted activities are identified. The sixth step in program development for students with the most severe handicaps is to prioritize the activities selected by parents, peers, teachers and the student for instruction. The following questions can help teachers prioritize activities (Hudson, 1990):

(1) Will the student immediately use the skills from the activity?
(2) Will the activity continue to be useful to the student as s/he grows older (e.g., is the activity longitudinally relevant?)
(3) Will the student use the activity in four or more environments?
(4) When doing the activity, will the student be integrated with his/her peers?
(5) Is the activity or skill important to the family?
(6) Is the activity one in which the students' nonhandicapped peers are engaged in?
(7) Is the activity one in which the student enjoys? (e.g., Is the activity fun?)

In addition, Helmstetter (1989) also suggests using the following questions to prioritize activities:

(8) Will the student acquire in one year the skills necessary to participate in the activity?

(9) Does the activity promote a positive view of the individual?

(10) Does the activity improve student's health or fitness?

(11) Do related service staff support the selection of the activity?

(12) Does the activity help maintain student in, or promotes movement to a least restrictive environment?

Once the priority activities are selected, program development for students with the most severe handicaps diverts from the ecological model. The instructional goal for some students within activities is to complete all steps of the activity independently. For other students, the instructional goal is to complete some steps in the activity independently and particial participate in other steps of the activity through adaptations . For other students, the goal of the activity is to practice basic skills in the context of age-appropriate activities. The priority activities become the framework for teaching basic skills, rather than learning to complete the steps in a task analysis. By considering basic skill instruction in terms of age-appropriate activities, the teacher can involve a student meaningfully in priority activities because the completion of the units of behavior (i.e., the steps in the task analysis) is not required.

For example, participation of a student with a visual impairment, cerebral palsy, and retardation in the steps required to make pudding seems meaningless. The student is not able to measure ingredients, stir, or pour without hand over hand assistance. The student can't eat the pudding without assistance, read the recipe, or wash the dishes. Involving this student in the activity of making pudding is watching others make pudding.

To identify a student's basic skill needs, the teacher must once again consult with other professionals involved in the student's education to help determine the appropriate basic skills to target for instruction within priority activities. Smith (1990) describes a transdisciplinary team approach involving the parents, physical therapist, occupational therapist, speech therapist, school nurse, adapted physical educator, school psychologist, and other consultants. Within the transdisciplinary model, professionals practice role-release, assuming a consultative role to the teacher. The integrated therapy approach (Smith, 1990) is a natural outgrowth of the interdisciplinary team approach in which traditional therapy objectives (including basic skills) are taught across the day in real-life situations rather than in isolated situations, allowing the student to meaningfully participate in priority activities. Refer to Appendix A for examples of basic skills.

After priority activities are selected for instruction and basic skills needs are determined, the teacher begins developing the Instructional Education Plan (IEP). In the past, teachers summarized a student's strengths and weaknesses on the IEP form. The rationale behind the summary may have been to help teachers target appropriate activities and/or skills (i.e., the weaknesses) for instruction. Very little meaningful information about the student can be put in a 2" x 2" box on a form that will help teachers develop a good program for students. The Office of Education for Exceptional Children, Kentucky Department of Education, recommends that teachers summarize the student's present level of performance rather than describe strengths and weaknesses. The present level of performance includes the following information:

(1) the results of student evaluations, including informal evaluations (e.g., peer surveys, parent surveys, social validation evidence)

(2) a description of the effect of the handicapping conditions on academic andnon-academic areas, and

(3) how the student learns (e.g., effective teaching procedures, (time delay), and effective reinforcement procedures (verbal praise or a walk with a nonhandicapped peer).

Categorical labels are not used to describe a student's present level of performance and the types of services the student needs are not described. The present level of performance should show a direct relationship to other components of the IEP (e.g., the goals and objectives) and information should be described in objective, measurable ways. Figure 1 is an example of a present level of performance statement written for a student with deaf blindness and motor disabilities.

Insert Figure 1 about here

Annual goal statements relate to the needs described in the present level of performance including (1) the basic skill (e.g., communication, self-help, cognitive, motor, sensory) and (2) the priority activities across the four instructional domains (community/school, domestic, recreational/ leisure, and vocational). Reaching is a basic skill that is used in the following annual goal example.

Annual Goal:

> "To improve the basic skill of reaching throughout the domestic, community/school, recreation/leisure, and vocational domains in the following activities: (1) daily arrival routine, (2) enrichment classes: art and music, (3) community-based education, (4) lunch, (5) cooking simple foods and snacks, and (6) recreation activities with nonhandicapped peers."

The priority activities in the annual goal statement must sample the four instructional domains and provide opportunities for interactions with nonhandicapped peers (e.g., classes with nonhandicapped peers, lunch, recess). However, these activities are not the only activities in which basic skill instruction of "reaching" can be embedded. Other activities in the day are appropriate. One annual goal will be written for each basic skill targeted for instruction (e.g., if four basic skills are targeted for instruction, the IEP will include four annual goals).

After annual goals are written, instructional objectives can be developed. Well-written instructional objectives act as roadmaps, describing for teachers how to embed basic skill instruction in priority activities . An instructional objective includes four elements: (1) the condition under which the behavior is to be performed, (e.g., when involved in an activity and given a verbal cue), (2) the behavior the student is expected to do written in measurable terms, (e.g., extend his right forearm from the elbow, making contact with the item), (3) the criteria for mastery, (e.g., within 15 seconds, 4 of 5 opportunities), and (4) the setting(s) in which the behavior is to occur and the plans for generalization, (e.g., home kitchen, school classroom, video store, grocery store, three consecutive days). An instructional objective for reaching is used in the following example (see Figure 2 for an example of how this instructional objective might look on the IEP).

Instructional Objective:

> "When involved in an activity (described below) and given a verbal cue to "reach for ____" when the item is placed 2-4 inches in front of the student, the student will extend his right

forearm from the elbow to make contact with the item with 15 seconds, 4 of 5 opportunities for 3 consecutive days. Examples of activities in which the student will practice reaching are:

(1) cooking snack (domestic domain),
(2) playing video games (recreational/leisure domain),
(3) hanging up coat (school domain), and
(4) grocery shopping (community domain).

It is possible (and often done) to meet all the criteria for a sound objective and still not have an objective that will lead you to meaningful instruction for the student. For example, consider the instructional implications of the following example:

> "When placed on a roll, the student will have adequate cocontracture of the neck extensers and flexers to maintain her head in an upright position, 3 out of 5 minutes for 3 days."

This objective meets all the basic requirements of a sound instructional objective, but does not guide the teacher to meaningful instruction. Using the instructional objective described above as a road-might lead a teacher to instruct the student, one-to-one, for five minutes a day. Not only is it very unlikely that the student will learn to hold their head up, the student is not involved in functional, age-appropriate activities with his/her peers without handicaps.

In addition to describing the priority activities in which reaching will be developed across the day, an effective instructional objective must also detail the type of supports necessary for the student to be involved in the activities. Supports can be adaptations to the normal routine or rules, proper sitting and positioning techniques, feeding techniques, adaptive switches, partial physical assistance, use of high-color contrast materials, and or peer assistance. The supports necessary for the student to be successful in priority activities should be described directly on the IEP. An example of the type of supports that might be necessary for a student developing the basic skill of reaching are:

(1) Partial physical assistance after 15 seconds of no responding,
(2) Use of materials with high-color contrast,
(3) Proper positioning in relation to objects for which Mark has to reach,
(4) Use of adaptive switches, and
(5) Use of peer assistance to successfully complete some activities.

From well-written instructional objectives, the teacher can develop instructional programs for the student. One method used by teachers to develop daily instructional plans is the activity matrix. The instructional objectives contain the information needed for developing the activity matrix: (1) the basic skill targeted for instruction, (2) a description of the daily activities, and (3) individual student adaptations.

An activity matrix is a visual representation of how basic skills will be embedded into activities thoughout the student's day. The activity matrix assures that students with severe handicaps and dual sensory impairments actively participate in functional classroom activities. The annual goal statements and instructional objectives, if properly written, contain all the information needed to develop the activity matrix: (1) the basic skills targeted for instruction, (2) the daily routines in which the student will participate across the four instructional domains, (3) the activities within those routines, and (4) individual student adaptations.

A sample of an activity matrix (Figure 2) shows one way in which it can be designed. In this example, the basic skills are printed across the top of the page. Daily routines are listed down the left-hand side of the matrix in bold print. It is assumed that these routines will remain somewhat consistant from day to day. What will change is the activity within that routine. For example, during the cooking routine, it is assumed that the class will have a different cooking activity each day. The boxes in the center of the matrix are used to describe how each basic skill will be embedded into each activity. If functional skills have been identified, each skill should be practiced in all activities. However, it is possible that some skills may not be embedded into all activities. In the sample matrix, the student is given the opportunity to practice the basic skill of reach throughout the entire school day. Lastly, at the bottom of the activity matrix, there is a section for describing adaptations that may be used including: physical assistance, use of adaptive switches, and adaptive poisitioning equipment.

Insert Figure 3 about here

The activity matrix is used to focus instruction on embedding basic skills into an activity.

However, use of the activity matrix should not limit practice of the basic skill to one instance within the activity, (i.e., the student reaches to hang up his coat during the morning arrival routine and never reaches again until the next scheduled activity, even though many opportunities to reach occur.) The activity matrix ensures that instruction occurs on the basic skill within the activity. There are possibly many opportunities within each activity that the student could practice the skill. On the sample matrix, for example, it states that the student will practice the basic skill of reach during the cooking activity be reaching for the cooking materials. The student could also practice that basic skill within the cooking activity by reaching for a switch to turn on an appliance, reaching for an eating utinsel to eat the snack, or reaching for a peer to ask for assistance. The activity matrix should not limit instruction for the student with severe handicaps where by the student practices the basic skill and sits idly throughout the remainder of the activity.

The activity matrix serves many purposes. The matrix can be used as a daily lesson plan by changing activities with the day of the week. The matrix can convey the daily schedule and programming goals to other professionals working the student. Lastly, the matrix can be used as a data collection sheet during instruction by tallying how many times the basic skill is demonstrated by the student or the amount of assistance required for the student to participate (e.g., how many times the student reaches for a grocery items after a verbal cue to reach).

Conclusion.

Developing an IEP to meet the many needs of students with severe handicaps and dual sensory impairments is a challenge for teachers. An adaptation of the ecological model may be useful in developing instructional programs for students with the most severe handicaps , including (1) identifying age-appropriate and longitudinally relevant activities, (2) prioritizing the activities for instruction, (3) developing an IEP that describes a student's present level of performance and related annual goals and instructional objectives, and (4) developing an activity matrix detailing how daily instruction will occur on basic skills across the student's day. Teachers must consider family needs, parent expectations, and activities popular with the student and nonhandicapped peers when selecting activities. Because of the limited amount of time available in a school year, activities must then be prioritized, teaching those activities most beneficial to the students. Once the priority activities are selected, broad annual goal statements are written describing general skill development in the four curricular domains.

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Figure 1. An example of a present level of performance statement for a student with severe handicaps.

Mark is 10 years old and attends a public elementary school. Mark has a moderate hearing impairment and limited use of his arms and hands. According to his eye doctor, Mark is legally blind (vision of 20/800).

Mark enjoys music, especially country music. He can use a switch to start his tape player. Mark smiles when his favorite people are around. He goes to lunch with a friend from the fourth grade every day. Mark will turn to look at someone when they come up to him and he will look at his cup or bowl to tell you he is hungry or thirsty. Sometimes when no one is listening to him, Mark will bite on his hand and scream.

Mark's mother said in an interview with the teacher that they include Mark in most family activities. Mark attends church, goes to the grocery, and occassionally out to eat with his family. Mark's brother (5th grade) likes to push his wheelchair. Mark's family would like to include Mark more on their camping trips (twice a year) and would like for Mark to help dress himself and to wake up without a struggle in the morning.

Mark's nonhandicapped fourth and fifth grade peers said their favorite after-school activities were: playing Nintendo, basketball, and skateboarding with friends. In their spare time they liked to listen to music, watch music, and go to the mall. Around home, most of Mark's peers helped with household chores (e.g., taking out the trash, making their beds, cleaning up the dinner dishes and keeping their room neat). The majority of Mark's peers receive an allowance and they spend their allowance on going to the movies and clothes.

Figure 2. A sample instructional objective for a student with severe handicaps

Instructional Objective	Adaptations	Persons Resposible	Review Dat
When involved in an activity (described below) and given a verbal cue to "reach for ______" and when the item is placed 2-4" in front of Mark, Mark will extend his right forearm from the elbow to make contact with the item within 15 seconds, 4 of 5 opportunities (for 3 consecutive days.) Examples of activities in which Mark will practice reaching are: (1) cooking snack (domestic domain) (2) playing video games (recreation/ leisure domain) (3) hanging up coat (school domain) (4) grocery shopping (community domain)	*Partial physical assistance after 15 seconds of no responding. *Use of materials with high-color contrast *Proper positioning in relation to objects for which Mark has to reach *Use of adaptive switches *Peer assistance to successfully complete some activities such as hanging up coat		

Figure 3. Activity Matrix

BASIC SKILLS						
SCHEDULE	REACH	ALERTING TO AUDITORY STIMULI	FOCUSING ON VISUAL STIMULI	LOCOMOTION	REQUESTING ASSISTANCE	GREE PEER
DAILY ARRIVAL 8:00-8:15 ACTIVITY: hanging up coat	Reach toward hook with coat	Alert to verbal cue from teacher or peer to "hang up coat".	Visually attend to coat and hook	Uses joystick to operate electric wheelchair	Press switch to activate endless tape lope, "I need help"	Smile and nod
ART CLASS (with peer) 8:15-9:00 ACTIVITY: Painting	Reach for switch to activate "Paint &					
COMMUNITY 9:00-11:30 ACTIVITY:grocery shopping	Reach to receive groceries, change					
LUNCH 11:30-12:00 ACTIVITY: going through the line	Reach to select choice of food from food cards					
RECREATION (with nonhandicapped peer) 12:00-12:45 ACTIVITY: Video Games	Reach to activate joystick					
COOKING 12:45-1:45 ACTIVITY: Making pudding	Reach for cooking materials					
MUSIC CLASS (with peer) 1:45-2:30 ACTIVITY: listening to music, playing instruments	Reach for a switch to operate the record player					
PREPARE FOR HOME 2:30-2:45 ACTIVITY: Getting items from locker	Reach for coat in locker					

Figure 3, continued.

	BASIC SKILLS CONTINUED					
SCHEDULE	REACH	ALERTING TO AUDITORY STIMULI	FOCUSING ON VISUAL STIMULI	LOCOMOTION	REQUESTING ASSISTANCE	GREE PEERS
ADAPTATIONS	Physical Prompting Positioning in relation to furniture Loosening H-Strap Make coat hook identifiable by putting flourescent tape on it					

APPENDIX A

EXAMPLES OF BASIC SKILLS

Compiled by Jennifer Leatherby

COMMUNICATION

EXPRESSIVE

request:
- object in open view
- ongoing action
- attention
- information, permission
- absent object, action

confirm/deny
protest/reject
declare/comment
direct attention
offer/share
question
greeting

RECEPTIVE

use of auditory, visual, tactual cue
follow gestures, contest cues
understand verbal cues or directions

SELF-HELP SKILLS

FEEDING

sucking
swallowing
biting
chewing
arm/hand movements required for using utensils

SELF-INITIATED TOILETING

retention of urine and defecation
release of urine and defecation
movement to toileting facilities
request for toileting facilities

DRESSING/UNDRESSING

maintenance of grasp while arm moves
automatic reactions - (righting reactions, equilibrium reactions, and protective extension)
purposeful arm movements
taking off and putting on garments
fastening and unfastening fasteners

MOTOR

GROSS MOTOR

head control
trunk control
sitting posture
upright posture
locomotion

FINE MOTOR

shoulder girdle posture/stability
reach
grasp
release
transfer

SENSORY

HEARING

attends to sound
localizes to sound
associates sound with familiar objects, i.e., people, events

VISION

attends to light
localizes to light
tracks light
attends to objects
focuses on objects
tracks objects
movement exploration
visually inspects objects
shifting gaze
scanning

<table>
<tr><th colspan="6">BASIC SKILLS</th></tr>
<tr><td>SCHEDULE</td><td></td><td></td><td></td><td></td><td></td></tr>
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Instructional Objective	Adaptations	Person Responsible	Review D

APPENDIX A

KENTUCKY DEPARTMENT OF EDUCATION

SERVICES FOR DEAF BLIND CHILDREN AND YOUTH

Final Report - Year 1

October 1, 1989 - September 30, 1990

Project Number H025A90008-89

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Appendix A

KENTUCKY SERVICES TO DEAF-BLIND CHILDREN
October 1, 1989 - September 30, 1992

PROJECT ABSTRACT

In order to increase the state's capacity to appropriately educate deaf-blind children and youth, the Kentucky Department of Education (SEA) proposes to implement a **SINGLE STATE PROJECT** under Priority 84.025A. Kentucky has operated a single state project under this program since 1984.

The **GOAL FOR 1989-92** is to provide training and technical assistance to improve the quality of special education and related services in Kentucky for individuals ages birth through twenty-one years who have dual sensory impairments, in integrated environments with programs designed to lead toward full community participation. Special emphasis is on individuals above and below mandatory school age.

The project is designed as an **INTEGRATED EFFORT BY THE STATE EDUCATION AGENCY** (**SEA**) through the Office of Education for Exceptional Children:

- The **Office of Education for Exceptional Children (OEEC)** will provide overall management to assure that local services for deaf-blind children and youth are fully integrated in overall programs in the state which serve individuals with and without handicaps.

- Through **subcontract from OEEC, the University of Kentucky Deaf-Blind Intervention Program (DBIP)** will provide statewide consultation, training, technical assistance and outreach to families, schools and agencies serving indivduals with dual sensory impairments.

- The operation of the Deaf-Blind Intervention Program will be closely coordinated with the **Kentucky Systems Change Project for Children and Youth with Severe Handicaps** (OEEC subcontract to the University of Kentucky).

- The operation of the Deaf-Blind Intervention Program will also be closely coordinated with the **lead agencies in Kentucky for P.L. 99-457**: OEEC (ages 3-5 years) and the Cabinet for Human Resources (birth-2 years).

Approximately **100 DEAF-BLIND CHILDREN AND YOUTH**, their families and service providers across the state will be served through the project. **ACTIVITIES INCLUDE:**

- onsite consultation statewide, with intensive efforts for those above and below school age;
- development of personnel preparation programs through faculty inservice and cooperation on undergraduate existing coursework;
- inservice seminars and workshops to address targetted needs, particularly for early childhood and adult service providers;
- family involvement in local planning and overall project direction;
- coordination of individual transition planning with all agencies involved;
- representation of interests of individuals with dual sensory impairments through coordination of the Kentucky Deaf Blind Steering Committee and through related statewide task forces.

The **EXPECTED BENEFIT** is the improved quality of local delivery of services for children and youth with dual sensory impairments on an individual and a statewide basis; that is, appropriate educational strategies used in integrated community settings.

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AGENCY LIST/ABBREVIATIONS

CHR	Cabinet for Human Resources (state agency)
CSPD	comprehensive system of personnel development
DBIP	Deaf-Blind Intervention Program (UK) - VI-C
DMR	Division of Mental Retardation (CHR)
DRB	Department for the Blind (state agency)
ITP	individual transition plan
KDE	Kentucky Department of Education (state agency)
KPDS	Kentucky Parent Development System (UK)
KSB	Kentucky School for the Blind (KDE/OEEC)
KSD	Kentucky School for the Deaf (KDE/OEEC)
MR/DD	mental retardation/developmental disabilities
OEEC	Office of Education for Exceptional Children (KDE)
OVR	Office of Vocational Rehabilitation (KDE)
RCD	rehabilitation counselor for the deaf (KDE/OVR)
RCB	rehabilitation counselor for the blind (DFB)
SHIPP	Severe Handicaps: Integrated Preschool Programming
SPLASH	Strategies for Programming Longitudinally for All Severely Handicapped
UK	University of Kentucky

PROJECT OBJECTIVES

Project Goal

TO PROVIDE training and technical assistance to improve the quality of special education and related services in integrated environments, with programs designed to lead toward full community participation

- * TO families and service providers in Kentucky;
- * FOR individuals ages birth through twenty-one years who have dual sensory impairments;
- * SPECIAL EMPHASIS on individuals above and below mandatory school age.

Objectives and Activities

1.0 To identify needs and represent the interests of individuals with dual sensory impairments in Kentucky

    1.1 Kentucky-Deaf Blind Steering Committee

2.0 To provide local consultation to families and providers of all individuals on the VI-C Registry, with more intensive efforts for those above and below mandatory school age

    2.1 Local Consultation to Agencies and Families
    2.2 Parent Opportunities

3.0 To develop preservice and inservice training regarding dual sensory impairments as part of Kentucky's Comprehensive System of Personnel Development

    3.1 Seminar for TMH Faculty of State Universities
    3.2 Preservice Modules for Undergraduate TMH Coursework
    3.3 Participation in SPLASH Training for Teachers
    3.4 Inservice in the Support Document for Teachers

4.0 To implement training and services for young children under age 5, based on Kentucky's state plans under P.L. 99-457 (Parts B and H)

    4.1 Coordination of SHIPP Training for Current Providers
    4.2 Development of KPDS Services (unserved children)

5.0 To institutionalize coordination of transition through the ITP process and personal futures planning

    5.1 Transition Training for Schools and Adult Providers
    5.2 Coordination with HKNC representative and affiliate

FIGURE 1

STATUS REPORT ON ACTIVITY COMPLETION

1.1 Steering Committee

- Fall 1989 update mailed to all members
- Transition subgroup meetings
- Early Childhood subgroup meeting
- One (1) full committee meeting
- Summer 1990 update mailed to all members

2.1 Local Consultation

- Ongoing

2.2 Parent Opportunities

- Seminar held for parents of young VI (including deaf-blind) children
- Parent workshop held on Individual Transition Planning (ITP)
- Summer Institute
- Annual parent retreat
- Parent Advisory Board meeting held
- Family Forum for parents with children on the deaf-blind registry held
- Conference held for parents of young VI (including deaf-blind) children

3.1 Seminar for TMH Faculty at State Universities

- Seminar held

3.2 Preservice Modules for Undergraduate TMH Coursework

- Modules completed (draft)
- Module 1 piloted 4 times at 2 universities

3.3 SPLASH Training

- Fall 1989 semester completed
- Fall 1990 semester in process

3.4 Inservice on Support Document

- 6 training sessions conducted

4.1 SHIPP Training

- Fall 1989 semester completed
- Fall 1989 Administrator Training conducted
- Awareness videotape developed
- Spring 1990 semester completed
- Spring 1990 Administrator Training conducted
- Fall 1990 semester in process

4.2 Development of KPDS Services

- 4 meetings held
- Recommendations

5.1 Transition Training

- 1 seminar for parents held
- Informal training of parents during consultation visits ongoing

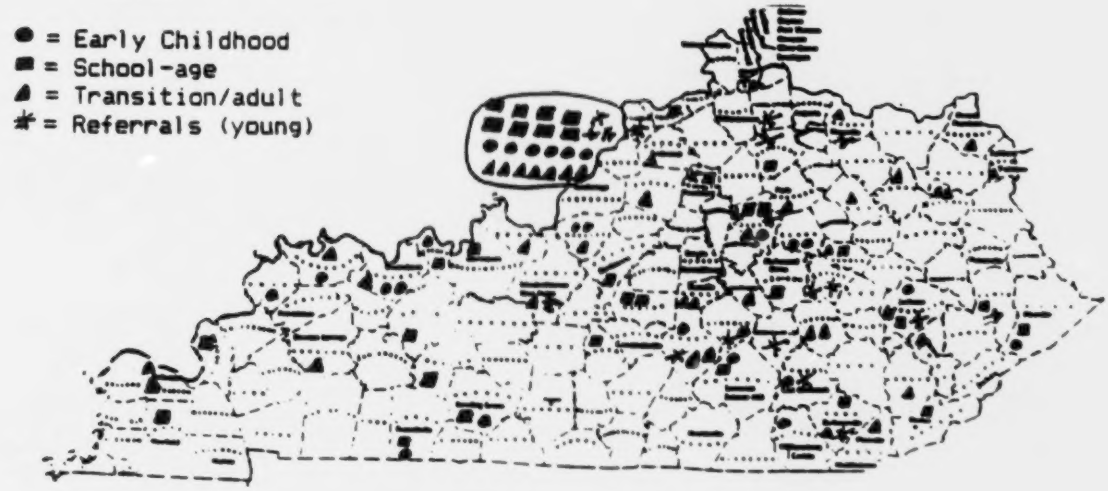
5.2 Coordination with HKNC Representative

- Joint client visits conducted in Febrauary
- HKNC Affiliateship awarded

Figure 2

CONSULTATION PROVIDED

Activity 2.1


● = Early Childhood
■ = School-age
▲ = Transition/adult
✱ = Referrals (young)

CHILDREN AND YOUTH
THE KENTUCKY DEAF-BLIND REGISTRY
9-30-90

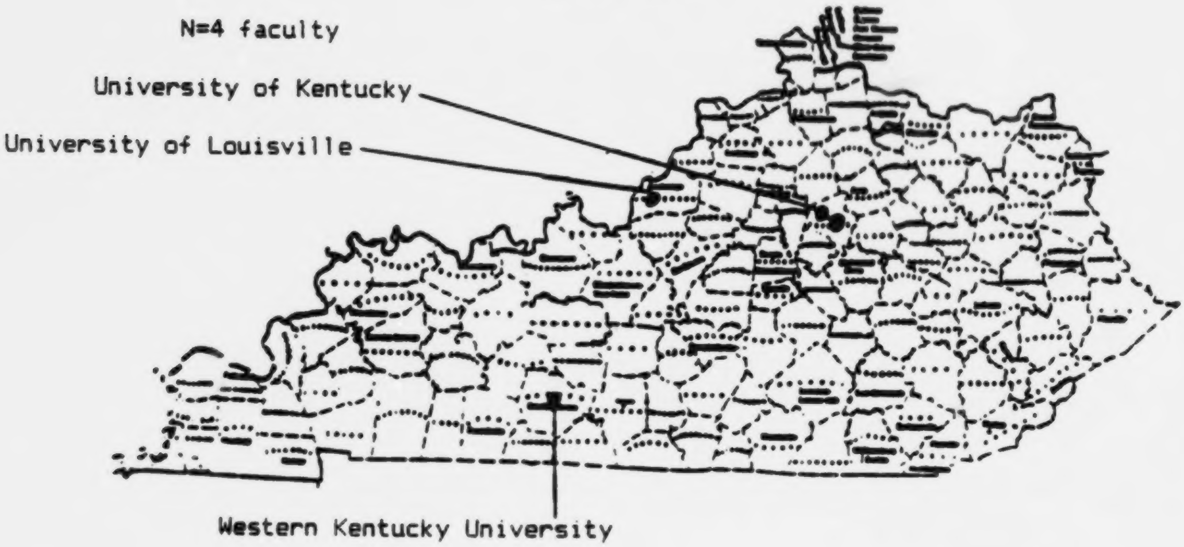
	# ON REGISTRY	# RECEIVING ONSITE CONSULTATION	# IN REFERRAL
October 1989 - January 1990	94	31	29
February 1990 - May 1990	85	39	28
June 1990 - September 1990	96	45	25

Figure 3

FACULTY TRAINING

Activity 3.1

Spring 1990


N=4 faculty
University of Kentucky
University of Louisville
Western Kentucky University

Content

2 day-seminar

- Developing Individual Transition Plans
- Partial Participation and Adaptations for the Handicapped Child in the Regular Classroom
- Early Childhood Intervention

Impact

- 4 faculty at 3 universities
- 113 university students in:
  - Methods and Materials for TMH
  - Assessment for TMH and S/PH
  - Prescriptive Programming (TMH and S/PH)
  - Programming for Deaf Multihandicapped
  - Early Childhood Special Needs
  - SPLASH

Evaluation (out of a scale of 1 to 7, with 7 as high score):

- organization : 6.0
- objectives : 6.25
- consultant : 6.75
- ideas/concepts : 6.25
- scope : 6.0
- relevance : 6.25
- overall rating : 6.5

Figure 4

SPLASH TRAINING

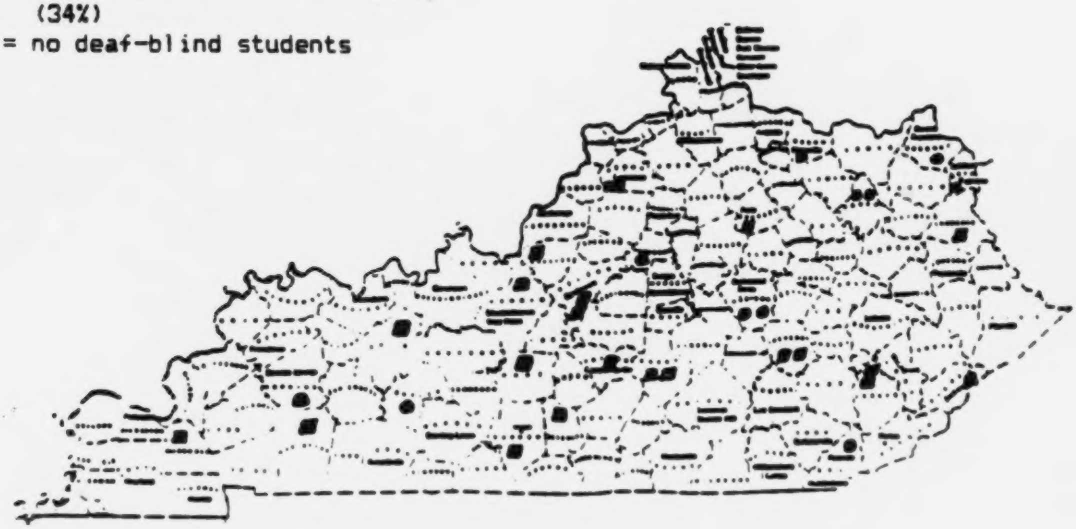
Activity 3.3

(Strategies for Programming Longitudinally for All Severely Handicapped)

FALL 1989

SPLASH Participants
N=32

● = deaf-blind student in agency
(34%)
■ = no deaf-blind students



Content

10 days of inservice training (3 semester hours) with practicum

- community-based education
- systematic instructional procedures
- non aversive behavior management
* communication
* activity - oriented programming (embedded skills)

* = covered by deaf-blind staff

Competencies Covered

- activities catalog development
- social skills program with data
- instructional skills program with data

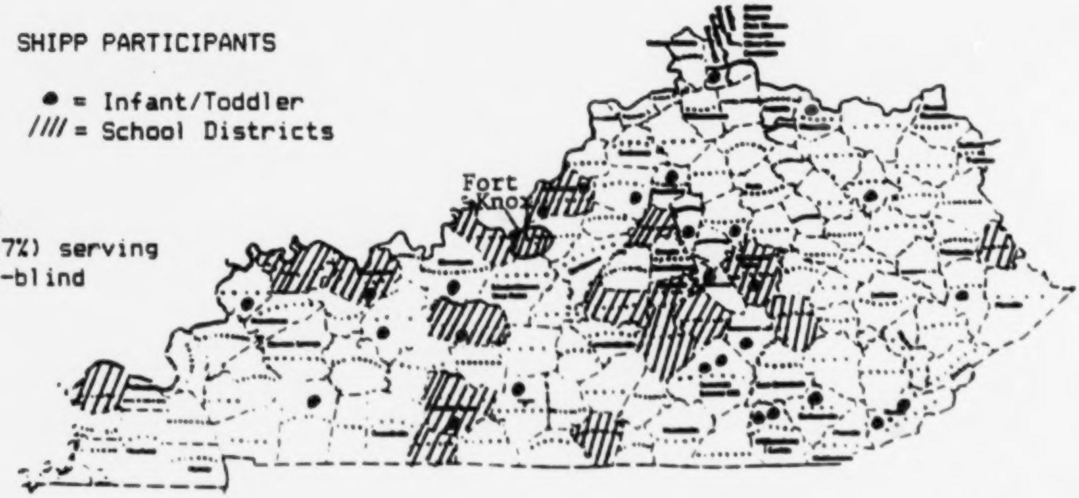
Figure 5
EARLY CHILDHOOD INSERVICE

Activity 4.1
Severe Handicaps: Integrated Prescnool Programming

SHIPP PARTICIPANTS

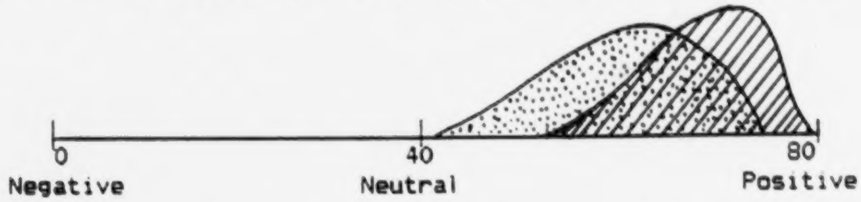
● = Infant/Toddler
//// = School Districts

N=72
12(17%) serving
deaf-blind



Content
10 days of inservice training (3 semester hours) with practicum

Impact:
Teacher attitudes regarding integration, transdisciplinary services, parents



░ Pretraining Survey - Range 44-76
Median 62 Average 61.2

▨ Posttraining Survey - Range 53-79
Median 68 Average 68.3

Utilization of Strategies = activity catalogue, embedded skills, cueing, integration, partial participation

For each teacher trained (N=72):
10.6 children affected (Total = 768)
1.1 others trained locally (Total = 80)
2.0 others receiving recommendation to use strategies (Total = 146)

Figure 6

ADMINISTRATOR TRAINING

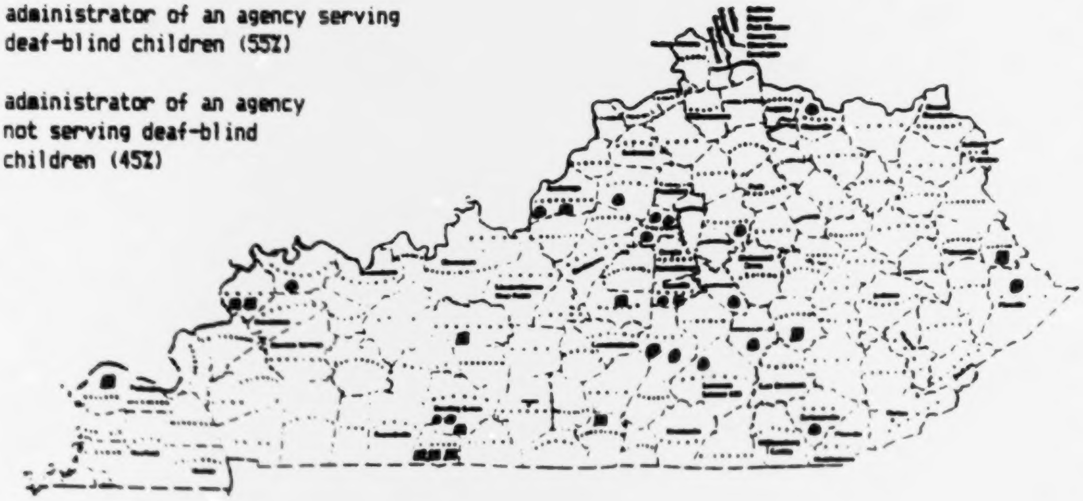
Activity 4.1

SHIPP (Severe Handicaps: Integrated Preschool Programmming)
Administrative Issues

ADMINISTRATOR TRAINING
N=33

● = administrator of an agency serving deaf-blind children (55%)

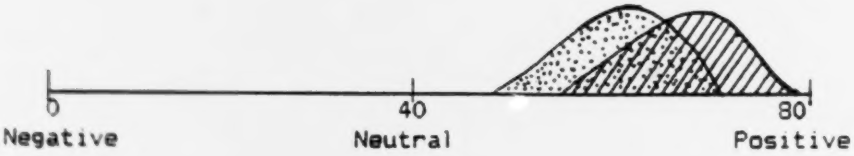
■ = administrator of an agency not serving deaf-blind children (45%)



Content
1 day (6 hours of approved Instruction Leadership Credits)

- functional programming for SPH students
- physical management of children with motor disabilities
- teaching skills for participation in home/family life
- role of the home instruction (v. classroom) teacher

Impact:
Administrator attitudes regarding integration, transdisciplinary services, parents



░ Pretraining Survey - Range 49-72
Median 61 Average 61.3

▨ Posttraining Survey - Range 56-78
Median 66 Average 67.2

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Figure 7

FAMILY FORUM

Activity 2.2

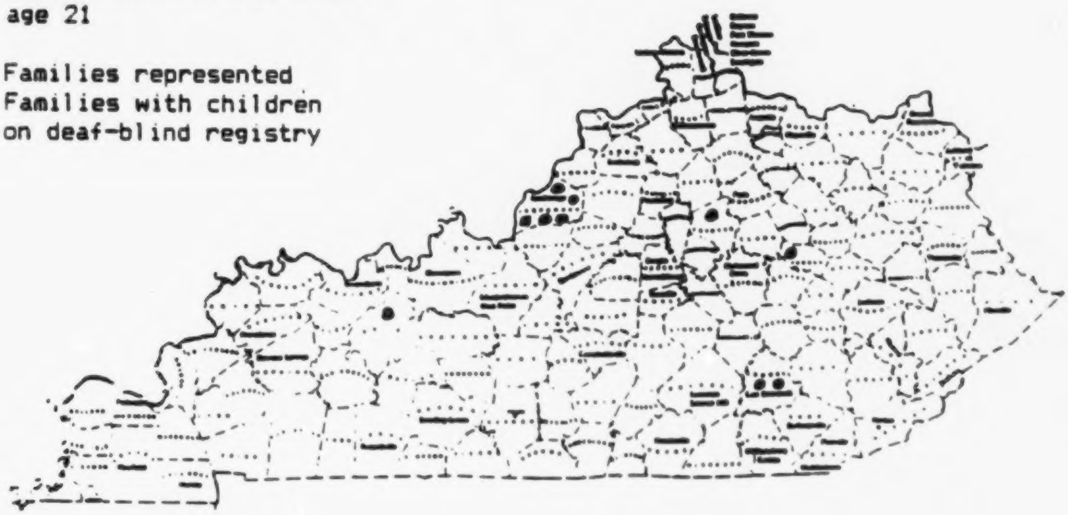
Fall 1990

Family Forum Participants

● -Families represented with children on Deaf-Blind registry

■ -Families represented with deaf-blind children over age 21

N=10 Families represented
90% - Families with children on deaf-blind registry



Content

1 day meeting with evening reception

- Coping with Stress Related to having a child with Handicaps
- Medicaid Waiver Programs
- Instilling Independence in child with Handicaps
- Pediatric Ophthalmology/Cortical Blindness

Impact

- 23 Family members from 10 separate families represented

Evaluation (out of a scale of 1 to 7, with 7 as high score):

- organization : 7.0
- presentations : 6.8
- media : 5.8
- activities : 7.0
- continuity/consistency : 6.3
- scope : 6.8
- length : 6.8
- overall rating : 6.8

Figure 8

KENTUCKY DEAF BLIND INTERVENTION PROGRAM

October 1, 1989 - September 30, 1990

CALENDAR OF EVENTS

Date	Objective	Description
FIRST REPORTING PERIOD - (Year 1)		
October 11	1	Joint staff meeting - Systems Change and Deaf Blind Projects
October 17	4.1	SHIPP Administrator Training (12 administrators)
October 18,20	3.3	SPLASH Training (32 teachers)
October 21	3.4	Inservice for emergency certified MH/SPH teachers (30 teacher
October 24-27	4.1	SHIPP Fall Module 2 (38 teachers)
November 1	1	Systems Change Advisory Board
November 2	2.2	Workshop for Parents of Visually Impaired Children
November 6	5.2	Transition Subgroup Meeting re: HKNC Affiliateship
November 9	3.4	OEEC Conference - Support Document training session
November 10	3.4	KACUS Convention - Support Document training session
November 29 - December 1	4.1	SHIPP Training - Fall Module 3 (38 teachers)
December 7	3.2	Pilot of Preservice Training Modules
December 12	1	Joint staff meeting - Systems Change and Deaf-Blind Projects
January 12	1.1	Transition Task Force meeting
January 16	3.4	Support Document Training at Ft. Wright School (15 teachers, administrators)
January 17	1.1	Project Lexington Advisory Board Meeting
January 18	3.4	Support Document Training for Bullitt County School District
January 24-26	4.1	SHIPP Training - Spring Module 1 (39 teachers)
January 30	1	Systems Change Advisory Board

SECOND REPORTING PERIOD - (Year 1)

February 8-9	3.4	Support Document Training at Bristow Elementary School
February 13	4.2	Early Childhood Core Team Meeting
February 14	4.2	Project Lexington Advisory Board Meeting
February 21	4.1	SHIPP Administrator Training (21 administrators)
February 27-March 2	4.1	SHIPP Training Module 2 (39 teachers)
March 5	2.2	Family Forum
March 9	3.4	Kentucky CEC Convention - Support Document Training Session
March 14	1.0	Joint Staff Meeting - Systems Change and Deaf Blind Projects
March 16-17	2.2	Parent/Professional Conference
March 19	4.2	Board Meeting - Kentucky Center for Special Children's Servic
March 27	5.2	Helen Keller Affiliateship Meeting
March 28-30	4.1	SHIPP Training - Module 3 (39 teachers)
April 6	1.0	Physician's Workshop - exhibitor
April 9	3.2	Pilot Preservice Modules at Western Kentucky University
April 10	3.4	Support Document Training - Anderson County Schools
April 11	3.2	Pilot Preservice Modules at Western Kentucky University
April 16	4.2	Board Meeting - Kentucky Center for Special Children's Servic
April 18	3.4	Support Document Training - Bowling Green
April 19	3.2	Pilot Preservice Modules at the University of Kentucky
April 19	3.4	Support Document Training - Bullitt County Schools
April 20	1.0	Presentation on Services available to individuals wi deaf-blindness
April 24	1.0	Joint Staff Meeting - Systems Change and Deaf Blind Projects
April 26	3.2	Pilot Preservice Modules at University of Kentucky
April 26	3.4	Support Document Training - Trinity High School (Jeffers County Schools)

May 2	1.0	Systems Change Advisory Board
May 9	1.1	Student of the Year Committee Meeting - recipient selected
May 9	5.2	Helen Keller Affiliateship Meeting
May 10-11	3.1	Faculty Seminar
May 23	1.0	Joint Seminar - Deaf Blind and Systems Change Project

---

THIRD REPORTING PERIOD - (Year 1)

June 6	4.0	Board Meeting - Visually Impaired Preschool
June 19	5.2	Transition: onsite visit by HKNC regional representatvie review clients
June 20	1.1	Kentucky Steering Committee for Deaf/Blind
June 21	5.2	Vocational Rehabilitation Training on Helen Kel Affiliateship
June 22	3.2	Pilot Preservice Modules at the University of Kentucky
June 27	4.0	Inservice sponsored by KY Department of Education on At-Risk year old services.
June 28-29	2.2	Systems Change and Deaf/Blind Projects Summer Institute Deaf/Blind Intervention Program displayed at Poster Session
July 9	1.1	Transition subgroup committee meeting
July 10	4.2	KPDS subcommitte meeting - Developing Plan of Action as resu of recommendations
July 16	1.0	Staff Meeting - KY Deaf/Blind Intervention Program
July 19	5.2	Joint visit with KY Helen Keller Affiliate
July 23	4.0	Carriage House Early Intervention Program - Board Meeting
July 25-26	1.0	Statewide Systems Change Project Advisory Board
July 30	4.2	KPDS subcommittee meeting - developing plan of action as resu of recommendations
August 15	5.2	Joint visit with KY Helen Keller Affiliate
August 18	2.2	KY Deaf/Blind Intervention Program - Parent Advisory Boa Meeting - 3 parents present (initial meeting)
August 21	3.4	Headstart Conference - Support Document Training Session

August 21	1.0	KY Deaf/Blind Intervention Program - Staff Meeting
August 29	2.2	Board Meeting - Project SPIN (Special Parent Involvem Network)
August 30	1.0	Joint Staff Meeting - Systems Change and Deaf/Blind Projects (Developent of I.E.P. Document)
September 5	3.4	Corbin Comprehensive Care - Support Document Training Sessior
September 10-11	3.4	Bluegrass Conference, Lexington, KY - Support Document Train Session
September 11	5.2	Joint visit with KY Helen Keller Affiliate
September 12	4.2	KPDS subcommittee meeting
September 14-15	2.2	Kentucky Deaf/Blind Intervention Program - first Annual Fam forum (10 families represented)
September 19-21	4.1	SHIPP Training - Fall Module 1 (36 teachers)
September 25-29	3.3	SPLASH Training - Fall Module 1
September 24	1.0	KY Deaf/Blind Intervention Program - Staff Meeting
September 27	4.2	Visually Impaired Preschool Advisory Board Meeting (subcommi of KPDS committee)
September 29	3.4	KY School for the Blind Preschool Conference - Inservice Support Document

SUMMARY OF PROGRESS TO DATE
YEAR 1: FINAL REPORT
October 1, 1989 - September 30, 1990

1.1 KENTUCKY DEAF-BLIND STEERING COMMITTEE

Description

The Kentucky Deaf-Blind Steering Committee is a state interagency advisory group which meets at least twice a year, with active subgroups on early childhood and transition. The committee was initiated in 1983.

Status to Date

Full Committee Meeting

The spring 1990 meeting of the Kentucky Deaf-Blind Steering committee was held in Frankfort at the Orlando Brown House.

- 10 members present, plus deaf-blind staff
- guests included: parent and teacher of Helen Keller Student of the Year; Helen Keller Student of the Year; the Helen Keller regional representative for Kentucky (Monika McJannet-Warner)
- review of project activities for deaf-blind including: Helen Keller Affiliateship; Summer Institute; University Training Modules; Personal Futures Planning Grant; S.H.I.P.P.
- discussion/recommendations by subgroups regarding increasing involvement of families in services for persons with dual sensory impairments
- a luncheon honoring the individual selected for the "Helen Keller Outstanding Student of the Year" award and the "Outstanding Contributor Award"

Transition Subgroup

Two transition subgroup meetings to plan for the new Kentucky Helen Keller National Center Affiliateship which was award in Fall 1989 but had a delay in funding from HKNC until June 1990. The transition subgroup met once more after funding was received for the Affiliateship to coordinate services between the VI-C Project and the Affiliateship. The VI-C transition subgroup is the advisory board for the HKNC Affiliateship in Kentucky.

Early Childhood Subgroup

One meeting of the early childhood subgroup to review SHIPP (Activity 4.1) and to identify service gaps for infants and preschool children with dual sensory impairments related to KPDS (Activity 4.2). Recommendations were developed and submitted to the State Department in June 1990 for implementation in 1990-91. This subgroup continues to meet as a function of KPDS (see status report on Activity 4.2).

Ad Hoc Topics
Other topics related to the Deaf-Blind Steering Committee include the following:

- Participation in Project Lexington Advisory Board to provide training for day care providers in integrated service settings for young children.
- Governor's Proclamation for Deaf-Blind Awareness Week - June 25-29, 1990
- Selection of Helen Keller Student of the Year

Due to the fact that the State Coordinator's position was filled only two days prior to the full committee meeting, the project advisory board survey was not conducted and is delayed until Spring, 1991.

2.1 LOCAL CONSULTATION TO AGENCIES AND FAMILIES

Description
The project provides on-site consultation visits to school and/or home for all children and youth referred to or placed on the VI-C Registry. There is also a computerized tracking system. The activity has been ongoing since 1983.

Status to Date

* Onsite consultation visits provided to at least 31 children and youth during the first reporting period (October 1989 - January 1990)
* Onsite consultation visits provided to at least 39 children and youth during the second reporting period (February 1990 - May 1990)
* Onsite consultation visits provided to at least 45 children and youth during the third reporting period (June 1990 - September 1990)
* Approximately 35-45 children on the caseload of each of the 3 consultants. An additional 14 children on the caseload of the State Coordinator
* Seven referrals received since June 1990 with 25 remaining in the process

In addition the Helen Keller Center representative for the Southeast Region visited Kentucky one time during the year for joint visits with the transition consultant. Also, the Helen Keller Affiliate for Kentucky made 4 joint visits with the transition consultant as well as 2 other visits alone to students on the VI-C registry who are in transition.

2.2 PARENT OPPORTUNITIES

Description
The project provides for parents to attend the Parent/Professional Conference and other seminars, plus occasional small group get-togethers at host homes. This activity has been ongoing since 1986.

Status to Date

* Seminar provided for parents of young children with vision impairments in Western Kentucky (November, 1989)
* Training provided on individual transition planning (ITP) process for parents of youth at the Kentucky School for the Blind. Training on ITP process also conducted for parents of youth on an individual basis.
* The annual retreat for parents of children on the Kentucky Deaf-Blind Registry was held in March 1990 in conjunction with the Parent/Professional Conference.
* Project staff attended the Family Forum (March 1990) and were available to assist parents of children on the Kentucky Deaf Blind Registry who also attended. The Family Forum is an exhibition of family oriented services available in the Louisville Metropolitan area.
* A Parent Advisory Board was formed as a result of recommendations from the Deaf Blind Steering Committee (Activity 1.1). One meeting was held in August 1990 to discuss possibilities of starting a Parent Network for Families with children on the Deaf/Blind Registry.
* Newsletter was disseminated (August 1990) to all families with children on the Deaf/Blind Registry per recommendations of the Deaf Blind Steering Committee (Activity 1.1). Content of the newsletter included information on Deaf Blind Project Activities and invitation to Family Forum.
* Grant was submitted to Hilton/Perkins Foundation (August 1990) to request funding to start a Parent Support Network for families with children with dual sensory impairments.
* First Annual Family Forum was conducted in Louisville Kentucky for families with children on the Kentucky Deaf Blind Registry (September 1990). Ten families were represented at the meeting.
* The Kentucky School for the Blind hosted its annual Preschool Conference for families of children with visual impairments. Families with children on the Deaf Blind Registry were invited. Project staff attended the conference and were available to assist parents of children on the Kentucky Deaf Blind Registry who attended.

The parent advisory board meeting and the family forum were substituted for small group meetings in host homes.

3.1 SEMINAR FOR THE TMH FACULTY OF STATE UNIVERSITIES

Description

The project conducts a seminar retreat on curriculum adaptations and other issues regarding services for individuals with dual sensory impairments, for relevant faculty from institutes of higher education in the state. This is an annual event since 1985.

Status to Date

- Faculty Seminar held at Lake Cumberland State Park on May 10-11, 1990. Four faculty from three state universities attended.

3.2 PRESERVICE MODULES FOR UNDERGRADUATE TMH COURSEWORK

Description

The project is developing preservice modules on the nature and needs of individuals with dual sensory impairments, to be piloted in identified TMH methods courses at participating universities, with TASH-TA Project. The broad content and relationship to existing content in specific TMH undergraduate courses was developed under the previous project: 1987-89.

Status to Date

- Draft content prepared for 3 modules with format for readings, media, resources, content and vignettes (case examples). Presently in revision with plans for finalized content by end of 1990 Fall semester.
- Pilot of module one in Fall 1989 at one university; pilot of module one in Spring 1990 at two universities; pilot of module one in Summer 1990 at one university.

3.3 PARTICIPATION IN SPLASH TRAINING FOR TEACHERS
(Strategies for Programming Longitudinally for All Severely Handicapped)

Description

The project staff teach topics in communication and functional programming for children with severe handicaps and dual sensory impairments covered by VI-C staff as part of a 10 day course taught for TMH and SPH teachers (SPLASH). The SPLASH training team is coordinated by the Systems Change Project. SPLASH was initiated in 1982; VI-C has participated since 1986.

Status to Date

- Fall 1989 semester completed, with 32 teachers trained, 4 serving children with dual sensory impairments (16%).
- Three sessions provided by VI-C staff, including a live demonstration of activity-oriented programming in an integrated group with children with severe handicaps and children without handicaps.
- SPLASH format changed by trainer team in Summer 1989 for training only in fall, with spring as practicum follow-up for fall trainees.
- Fall 1990 semester in process. VI-C staff will be participating in the training as trainers.

3.4 INSERVICE IN THE SUPPORT DOCUMENT FOR TEACHERS

Description
The project provides at least two workshops on the contents of the document developed under the 1987-89 cooperative agreement: Kentucky Programs for Students with Severe Handicaps Including Deaf-Blindness, 1989. Content reflects the quality indicators listed under Activity 2.1 Local Consultation.

Status to Date
* Full day workshop in November 1989 for 30 teachers serving TMH/SPH children and youth, as part of the Office of Education for Exceptional Children required training for emergency certification in TMH (strategy to address state teacher shortage)
* Session conducted for general education teachers in November at KAEYC (Kentucky Association for the Education of Young Children)
* Workshops conducted in January, February, and April (2) 1990 for teachers at four of the Systems Change Project model site districts
* Half day workshops conducted in April 1990 at two local school districts requesting additional assistance in using the Support Document
* Half day session for teachers conducted in March 1990 at KY-CEC (Kentucky Council for Exceptional Children) conference
* Session conducted in March 1990 for general education teacher at KACUS (Kentucky Association for Children Under Six)
* 1990 Summer Institute conducted on integration strategies for teams from Systems Change sites and programs servicing individuals with dual sensory impairments; administrator, special and regular teachers, parents, related services personnel
* Session conducted in August 1990 at Headstart Conference
* Workshop conducted in September 1990 at comprehensive care center for teachers serving students with severe handicaps and dual sensory impairments (birth - 5)
* Two sessions for teachers conducted in September 1990 at Bluegrass Conference
* Session conducted in September 1990 at Kentucky School for the Blind Preschool Conference

The Deaf-Blind Intervention Program is also in the process of developing a supplement to the Support Document entitled Writing IEP Goals and Objectives and Objectives for Students Requiring Basic Skill Instruction in conjunction with the Systems Change Project. Training sessions are in process and are planned for the future. (See Appendix A for a draft copy of this document)

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4.1 COORDINATION OF SHIPP TRAINING FOR CURRENT PROVIDERS
(Severe Handicaps: Integrated Preschool Programming)

Description
The project coordinates an intensive 10-day course (SHIPP) which is repeated each fall and spring semester for early childhood educators currently teaching young children with severe handicaps in Head Start, school districts, Comprehensive Care and private affiliates. There is an accompanying one-day leadership training workshop for administrators of those educators. SHIPP was initiated in 1988. Content reflects quality indicators listed under Activity 2.1 Local Consultation, with specific applications for children under 5.

Status to Date
* Fall 1989 and Spring 1990 semesters completed for 72 teachers (10 days) and 32 administrators (1 day)
* Awareness videotape developed with interviews with parents and activities in an integrated setting
* Fall 1990 semester in process, with 36 teachers and 4 administrators trained

Like SPLASH (Activity 3.3), approximately one-quarter of all SHIPP participating teachers serve children with dual sensory impairments among other infants, toddlers and preschool children. SHIPP also serves as an important Child Find network for the VI-C Registry.

4.2 DEVELOPMENT OF KPDS SERVICES (unserved children)
(Kentucky System of Parent Development)

Description
Project staff provide assistance to the PL 99-457 lead agencies, Office of Education for Exceptional Children and Cabinet for Human Resources, in expanding direct in-home services to families of young children with hearing impairments (SKI*HI model) to include children with severe and multiple handicaps, including dual sensory impairments.

Status to Date
* One meeting of the early childhood subgroup (Activity 1.1) to identify service gaps for infants and preschool children with dual sensory impairments related to KPDS
* Recommendations submitted to the State Department of Education in June 1990 for implementation possible beginning in 1990-91 via the PL 99-457 lead agencies. Recommendations included coordinating training for service providers of infants and children with severe and multiple handicaps including deaf blindness.
* Three meetings with early childhood lead agencies.
* Four meetings with KPDS committee members to develop plan of action for implementation of recommendations

5.1 TRANSITION TRAINING FOR SCHOOL AND ADULT PROVIDERS

Description

The project will provide local mentoring and a training workshop for families and local service providers in ITPs (individual transition plans) and personal futures planning.

Status to Date

* Informal training on ITPs occurring during consultation visits on behalf of youth with dual sensory impairments
* Contacts with in-state consultant skilled in personal futures planning for consumers and families
* Notification received regarding funding for Personal Futures Planning proposal submitted in collaboration with the Systems Change Project in Severe Handicaps, effective October 1, 1990; to benefit individuals on the VI-C Registry and their families.
* Seminar on ITP process in October 1989 at a conference conducted by the West Virginia State School for the Deaf and the Blind and Vocational Rehabilitation
* Session for parents of youth at the Kentucky School for the Blind on ITPs (see Activity 2.2)

5.2 COORDINATION WITH HKNC REPRESENTATIVE AND AFFILIATE

Description

Project staff conduct joint client visits approximately 2-4 times per year with the Helen Keller National Center regional representative from Atlanta.

Status to Date

* Joint client visits conducted with the HKNC representative on behalf of 14 clients on the VI-C Registry
* Two transition subgroup meetings (Activity 1.1) to plan for the new HKNC Affiliateship which was awarded in Fall 1989 but had a delay in funding until June 1990. Helen Keller Affiliate for Kentucky was appointed in June 1990.
* Joint client visits conducted with the Kentucky Helen Keller Affiliate on behalf of 4 clients on the VI-C Registry. Two additional visits made by Affiliate alone.

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PROBLEMS AND SOLUTIONS

Changes in Key Staff

Several staff changes have occurred since the original proposal. First, as reported earlier, the state coordinator position was vacated in spring 1989 when the VI-C coordinator resigned to become the preschool Section 619 director for OEEC and principal investigator for the VI-C project (Debbie Schumacher). The position was filled on a half-time basis from October 1 until June 15 of this project year by Carol Brooks. As confirmed to the OSEP Project Officer, Jennifer Leatherby is now serving as the full time VI-C coordinator.

Secondly, one of the consultants for the project who has been with the project since the start of the project (October 1989) requested and was granted a special leave of absence during the last month of the project year. Marie Ruf, the transition consultant has subsequently resigned effective November 5, 1990.

Resolutions

During the time in which there was no full time coordinator the following short-term solutions were implemented: (1) more extensive utilization of the OEEC principal investigator (2) assigning more coordinator tasks to the DBIP consultants; and (3) hiring the part-time temporary coordinator to perform administrative tasks (processing vouchers, maintaining the computerized data system, supervising the consultants, etc.). The leave of absence of the transition consultant resulted in further re-alignment of student caseload after the full time coordinator was hired.

Temporary delays in two activities occurred due to the lack of a full time state coordinator until June: the full Steering Committee meeting (Activity 1.1) and the full pilot of the TMH preservice modules (Activity 3.2). Further, the typical number of consultation visits conducted is less than in previous years since caseloads had to be reassigned.

Following the hiring of the new state coordinator partial resolution was achieved. The full Steering Committee met in June, but did not meet a second time as stated in the proposal. As a result of recommendations from the Steering Committee meeting, however, gains were made to increase parent opportunities (Activity 2.2). Additional parent activities during the third reporting period included:

formation of the parent advisory board; dissemination of newsletter to all families; development of Hilton/Perkins grant; and family forum.

A consultant was paid to finalize the module drafts which were completed in September. Revisions are now in process and should be completed at the end of the fall semester 1990.

APPENDIX B

KENTUCKY DEPARTMENT OF EDUCATION

SERVICES FOR DEAF BLIND CHILDREN AND YOUTH

Final Report - Year 2

October 1, 1991 - September 30, 1991

Project Number H025A90008-90

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KENTUCKY SERVICES TO DEAF-BLIND CHILDREN
October 1, 1989 - September 30, 1992

PROJECT ABSTRACT

In order to increase the state's capacity to appropriately educate deaf-blind children and youth. the Kentucky Department of Education (SEA) proposes to implement a **SINGLE STATE PROJECT** under Priority 84.025A. Kentucky has operated a single state project under this program since 1984.

The **GOAL FOR 1989-92** is to provide training and technical assistance to improve the quality of special education and related services in Kentucky for individuals ages birth through twenty-one years who have dual sensory impairments, in integrated environments with programs designed to lead toward full community participation. Special emphasis is on individuals above and below mandatory school age.

The project is designed as an **INTEGRATED EFFORT BY THE STATE EDUCATION AGENCY (SEA)** through the Office of Education for Exceptional Children:

- The **Office of Education for Exceptional Children (OEEC)** will provide overall management to assure that local services for deaf-blind children and youth are fully integrated in overall programs in the state which serve individuals with and without handicaps.

- Through **subcontract from OEEC, the University of Kentucky Deaf-Blind Intervention Program (DBIP)** will provide statewide consultation, training, technical assistance and outreach to families, schools and agencies serving indivduals with dual sensory impairments.

- The operation of the Deaf-Blind Intervention Program will be closely coordinated with the **Kentucky Systems Change Project for Children and Youth with Severe Handicaps** (OEEC subcontract to the University of Kentucky).

- The operation of the Deaf-Blind Intervention Program will also be closely coordinated with the **lead agencies in Kentucky for P.L. 99-457**: OEEC (ages 3-5 years) and the Cabinet for Human Resources (birth-2 years).

Approximately **100 DEAF-BLIND CHILDREN AND YOUTH**, their families and service providers across the state will be served through the project.

ACTIVITIES INCLUDE:

- onsite consultation statewide, with intensive efforts for those above and below school age;
- development of personnel preparation programs through faculty inservice and cooperation on undergraduate existing coursework;
- inservice seminars and workshops to address targetted needs, particularly for early childhood and adult service providers;
- family involvement in local planning and overall project direction;
- coordination of individual transition planning with all agencies involved;
- representation of interests of individuals with dual sensory impairments through coordination of the Kentucky Deaf Blind Steering Committee and through related statewide task forces.

The **EXPECTED BENEFIT** is the improved quality of local delivery of services for children and youth with dual sensory impairments on an individual and a statewide basis; that is, appropriate educational strategies used in integrated community settings.

AGENCY LIST/ABBREVIATIONS

CHR	Cabinet for Human Resources (state agency)
CSPD	comprehensive system of personnel development
DBIP	Deaf-Blind Intervention Program (UK) - VI-C
DMR	Division of Mental Retardation (CHR)
DRB	Department for the Blind (state agency)
ITP	individual transition plan
KDE	Kentucky Department of Education (state agency)
KPDS	Kentucky Parent Development System (UK)
KSB	Kentucky School for the Blind (KDE/OEEC)
KSD	Kentucky School for the Deaf (KDE/OEEC)
MR/DD	mental retardation/developmental disabilities
OEEC	Office of Education for Exceptional Children (KDE)
OVR	Office of Vocational Rehabilitation (KDE)
PFP	Personal Futures Planning
RCD	rehabilitation counselor for the deaf (KDE/OVR)
RCB	rehabilitation counselor for the blind (DFB)
SHIPP	Severe Handicaps: Integrated Preschool Programming
SPLASH	Strategies for Programming Longitudinally for All Severely Handicapped
UK	University of Kentucky

PROJECT OBJECTIVES

Project Goal

TO PROVIDE training and technical assistance to improve the quality of special education and related services in integrated environments, with programs designed to lead toward full community participation

* TO families and service providers in Kentucky;

* FOR individuals ages birth through twenty-one years who have dual sensory impairments;

* SPECIAL EMPHASIS on individuals above and below mandatory school age.

Objectives and Activities

1.0 To identify needs and represent the interests of individuals with dual sensory impairments in Kentucky

- 1.1 Kentucky-Deaf Blind Steering Committee

2.0 To provide local consultation to families and providers of all individuals on the VI-C Registry, with more intensive efforts for those above and below mandatory school age

- 2.1 Local Consultation to Agencies and Families
- 2.2 Parent Opportunities

3.0 To develop preservice and inservice training regarding dual sensory impairments as part of Kentucky's Comprehensive System of Personnel Development

- 3.1 Seminar for TMH Faculty of State Universities
- 3.2 Preservice Modules for Undergraduate TMH Coursework
- 3.3 Participation in SPLASH Training for Teachers
- 3.4 Inservice in the Support Document for Teachers

4.0 To implement training and services for young children under age 5, based on Kentucky's state plans under P.L. 99-457 (Parts B and H)

- 4.1 Coordination of SHIPP Training for Current Providers
- 4.2 Development of KPDS Services (unserved children)

5.0 To institutionalize coordination of transition through the ITP process and personal futures planning

- 5.1 Transition Training for Schools and Adult Providers
- 5.2 Coordination with HKNC representative and affiliate

Figure 1

STATUS REPORT ON ACTIVITY COMPLETION

1.1 Steering Committee

- Meeting of project staff from Deaf/Blind Intervention Program, Personal Futures Planning Project and Helen Keller Affiliateship
- Two full committee meetings (February and June)
- Two transition subcommittee meetings (March and July)
- Three project newsletters sent to all Steering Committee Members

2.1 Local Consultation

- Ongoing

2.2 Parent Opportunities

- Three (3) newsletters sent to all parents with children on the Kentucky Deaf/Blind Registry
- Hilton/Perkins Grant funded (Fall, 1990)
- Three (3) Parent Advisory Board Meetings
- One presentation by project staff at Parent Professional Conference
- Representation of Project Staff on KY SPIN governing board
- Invitation extended to families for Summer Institute (July)
- Family Forum (August)

3.1 Seminar for TMH Faculty at State Universities

- Faculty survey sent February 1991 re: appropriate topics
- Seminar conducted, Kentucky Leadership Conference Center, Faubush (May)

3.2 Preservice modules for Undergraduate TMH Coursework

- Modules completed (May) and disseminated at Faculty Seminar
- Module 1 piloted three (3) times at 2 universities and once at SHIPP (September)

3.3 SPLASH TRAINING

- Fall semester completed
- No spring training - One (1) follow-up visit (May)

3.4 Inservice on Support Document

- 16 workshops/training session conducted

4.1 SHIPP Training

- Fall and spring semesters completed
- Fall and spring administrators training completed
- 4 follow-up consultations conducted
- Fall, 1991 semester in progress

4.2 Development of KPDS

- Assistance in development of PREVIEW training
- Representation at one (1) core team meeting
- Development of R.F.P. for Low Incidence Early Childhood Grants
- Assistance with PREVIEW summer assessments
- Attendance at PREVIEW summer training (July)

5.1 Transition Training

- Informal training of parents during consultation visits ongoing
- Meeting with Transition Project staff
- Attendance at Kentucky Department of Education Transition training

5.2 Coordination with HKNC Representative

- Two (2) joint client visits with National Representative
- National and State Representatives represented at Winter Retreat (January)
- Five (5) joint client visits with State Representative

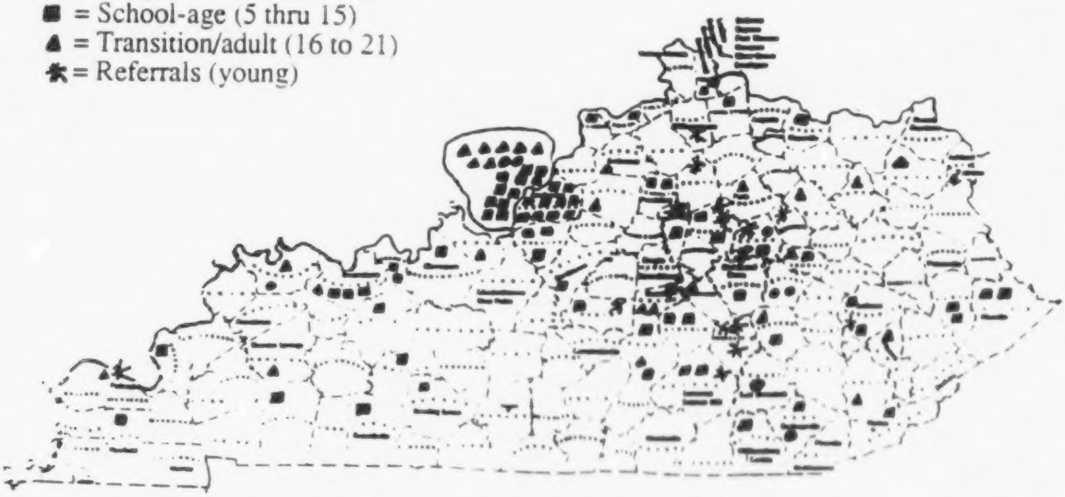
Figure 2

CONSULTATION PROVIDED

Activity 2.1

CHILDREN AND YOUTH
THE KENTUCKY DEAF-BLIND REGISTRY
9-30-91

● = Early Childhood (0 to 5)
■ = School-age (5 thru 15)
▲ = Transition/adult (16 to 21)
✱ = Referrals (young)



	# ON REGISTRY	# RECEIVING ONSITE CONSULTATION	# IN REFERRAL
October 1, 1990 - January 31, 1991	104	34 (33%)	17
February 1, 1991 - May 31, 1991	105	64 (52%)	18
June 1, 1991 - September 30, 1991	101	53 (43%)	22

Figure 3

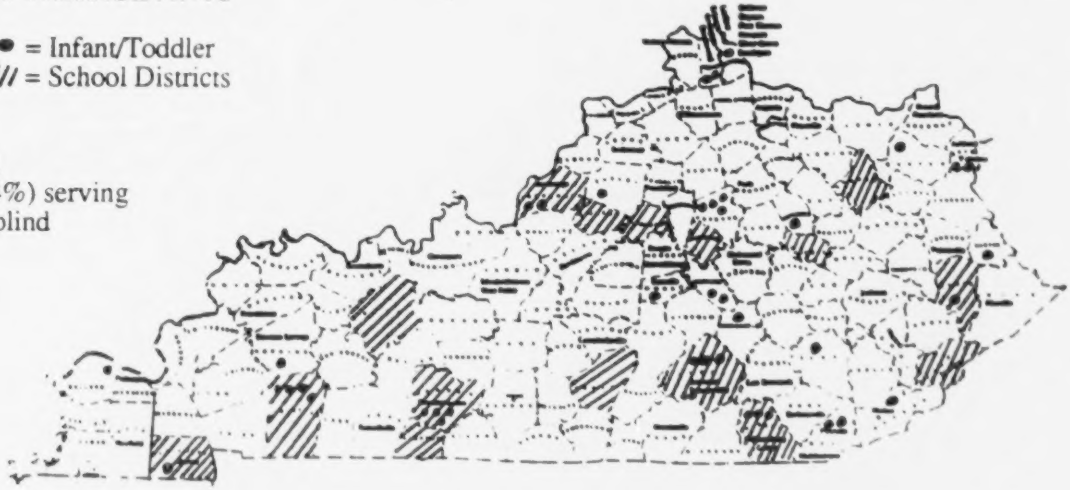
EARLY CHILDHOOD INSERVICE

Activity 4.1
Severe Handicaps: Integrated Preschool Programming

SHIPP PARTICIPANTS

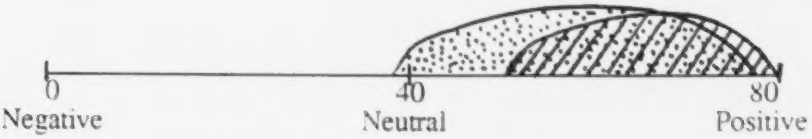
● = Infant/Toddler
//// = School Districts

N=71
17(24%) serving
deaf-blind



Content
10 days of inservice training (3 semester hours) with practicum

Impact:
Teacher attitudes regarding integration, transdisciplinary services, parents



░ Pretraining Survey - Range 39-78
Median 58.7
//// Posttraining Survey - Range 52-80
Median 67.7

Utilization of Strategies = activity catalogue, embedded skills, cueing, integration, partial participation

For each teacher trained (N=71):
10 children affected (N=710)
5.5 others trained locally (N=388)
6.75 others receiving recommendation to use strategies (N=480)

Figure 4

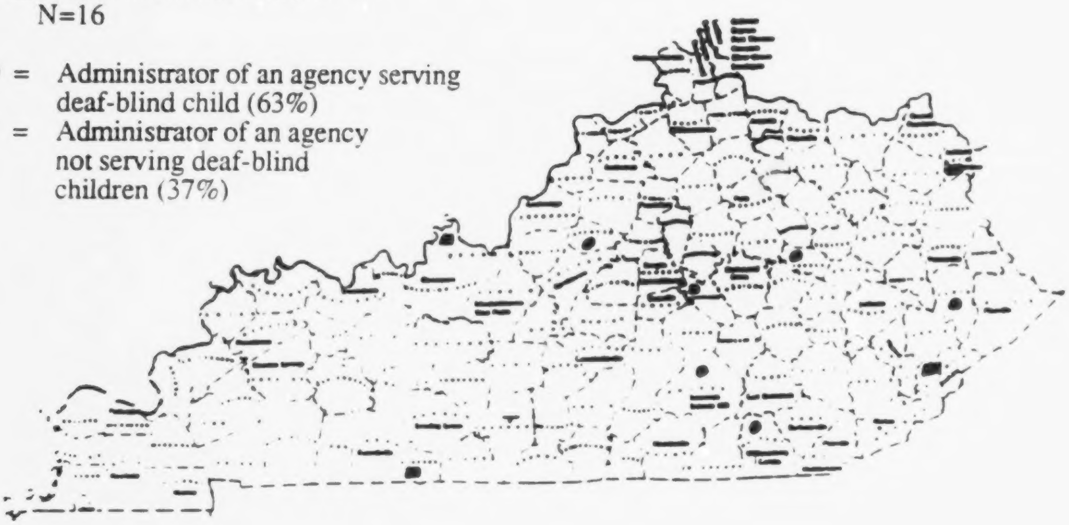
ADMINISTRATOR'S TRAINING

Activity 4.1
Severe Handicaps: Integrated Preschool Programming
Administrative Issues

ADMINISTRATOR TRAINING
N=16

● = Administrator of an agency serving deaf-blind child (63%)

■ = Administrator of an agency not serving deaf-blind children (37%)



Content

1 day (6 hours of approved Instruction Leadership Credits)

- Integration
- Activity-oriented programming
- Embedded skills
- Transdisciplinary Services
- Integrated Therapy Model
- Overview of P.L. 99-457

Evaluation (out of a scale 1 to 7 with 7 as high score)

		Average
1.	Organization	6.8
2.	Lecture	6.8
3.	Media	6.6
4.	Activities	6.3
5.	Objectives	6.8
6.	Continuity/consistency	6.8
7.	Scope	6.8
8.	Work of Presenters	6.9
9.	Overall rating	6.9

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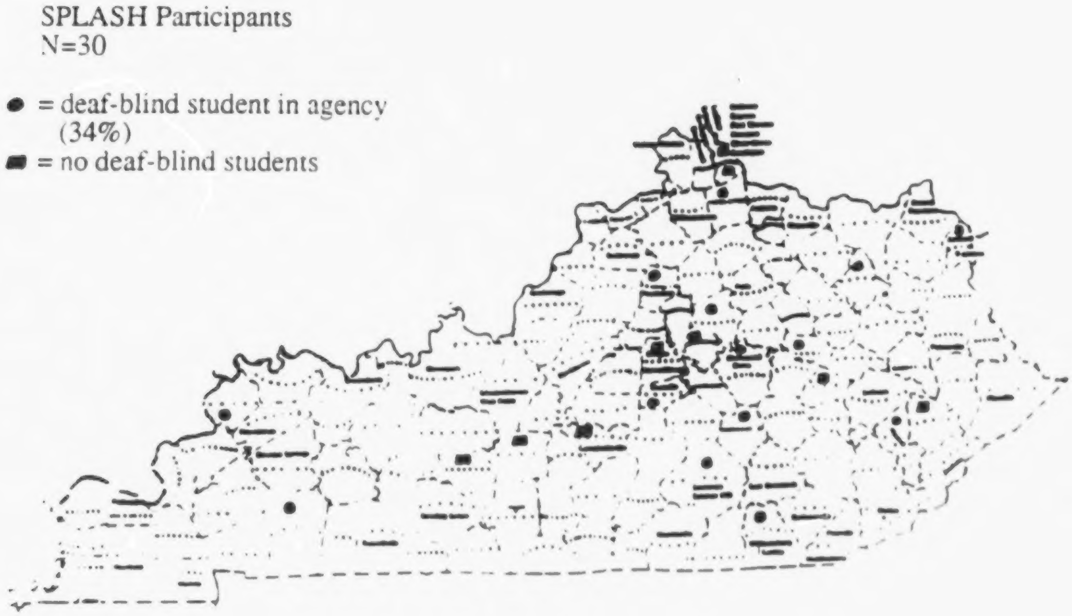
Figure 5

SPLASH TRAINING

Activity 3.3

(Strategies for Programming Longitudinally for All Severely Handicapped)

FALL 1990



SPLASH Participants
N=30

● = deaf-blind student in agency
(34%)
▬ = no deaf-blind students

Content

10 days of inservice training (3 semester hours) with practicum

- community-based education
- systematic instructional procedures
- non aversive behavior management
* integratrion strategies

* = covered by deaf-blind staff

Competencies Covered

- activities catalog development
- social skills program with data
- instructional skills program with data

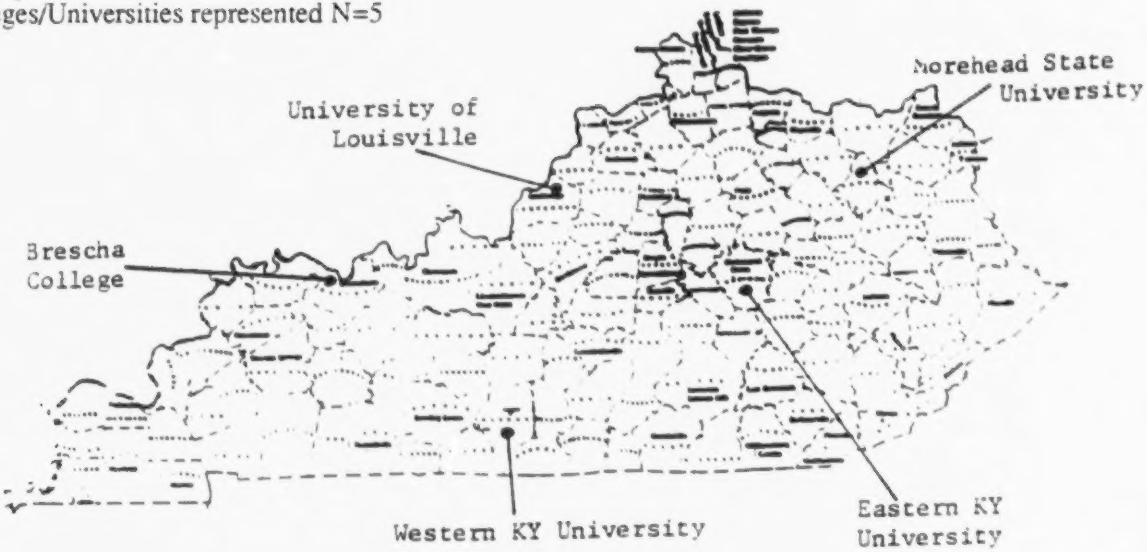
Figure 6

FACULTY SEMINAR

Activity 3.1

Spring 1991

Participants N=7
Colleges/Universities represented N=5


Morehead State University
University of Louisville
Brescha College
Western KY University
Eastern KY University

Content

2 days of training for special education/therapy faculty. Co-sponsored with KY Systems Change
- -University Curriculum Modules
- -Personal Future's Planning
- -Inclusive Education
- -Students with Complex Health Care Needs

Evaluation (out of a scale 1 to 7 with 7 as high score)

		Average
1.	The **organization** of the workshop was:	6.7
2.	The **objectives** of the workshop were:	6.7
3.	The work of the **consultants** was:	6.9
4.	The **ideas and activities** were:	6.9
5.	The **scope** (coverage) was	6.6
6.	**Relevance**	6.8
7.	**Overall rating**	6.8

Figure 7

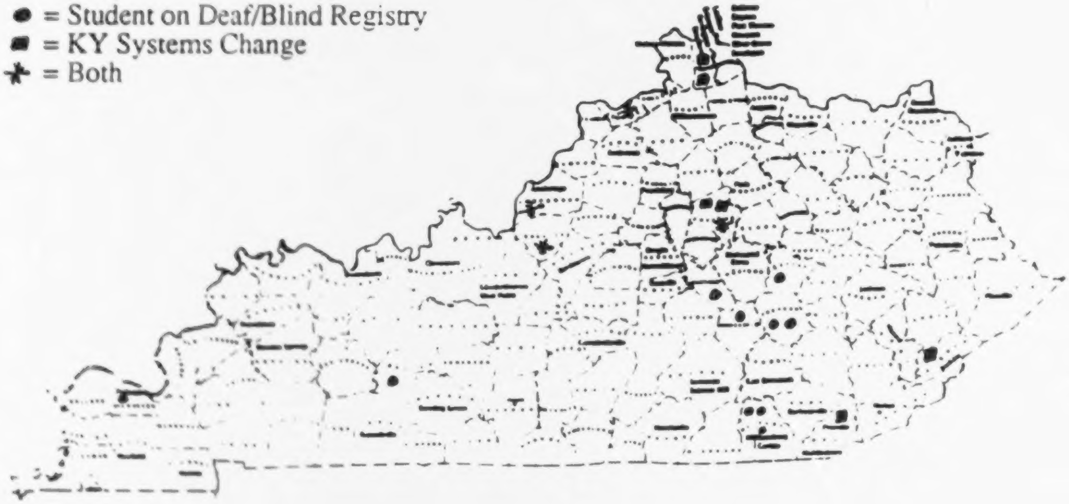
SUMMER INSTITUTE
ISSUES REGARDING STUDENTS WITH COMPLEX HEALTH CARE NEEDS

July 15-19, 1991

Activity 3.0

TEACHERS/SERVICE PROVIDERS
N=20

● = Student on Deaf/Blind Registry
■ = KY Systems Change
✚ = Both



EVALUATION DATA

Date: July 15, 1991
Content: Overview Day: Issues Regarding Students with Complex Health Care Needs

Evaluation (1 out of 7 with 7 as high score)

		Average
1.	Organization	6.4
2.	Objectives	6.5
3.	Work of Consultants	6.3
4.	Activities	6.0
5.	Scope	6.2
6.	Attendance should prove	6.0
7.	Overall rating	6.2

BEST COPY AVAILABLE

Date: July 16, 1991
Content: Health Care Protocols and Training

Evaluation

		Average
1.	Organization	6.5
2.	Objectives	6.7
3.	Work of Consultants	6.7
4.	Activities	6.5
5.	Scope	6.3
6.	Attendance shoul prove	6.7
7.	Overall rating	6.5

Date: July 17, 1991
Content: Physician's Role in the Education of Students with Complex Health Care Needs

Evaluation

1.	Organization	6.6
2.	Objectives	6.6
3.	Work of Consultant	6.8
4.	Activities	6.3
5.	Scope	6.6
6.	Attendance should prove	6.4
7.	Overall rating	6.7

Date: July 18, 1991
Content: Educational Considerations of Students with Complex Health Care Needs
Death and Dying Issues

Evaluation

1.	Organization	6.8
2.	Objectives	6.7
3.	Work of Consultants	6.8
4.	Activities	6.9
5.	Scope	6.6
6.	Attendance should prove	6.4
7.	Overall rating	6.8

Date: July 19, 1991
Content: Parent Concerns (Panel)
Basic Skill Instruction

Evaluation

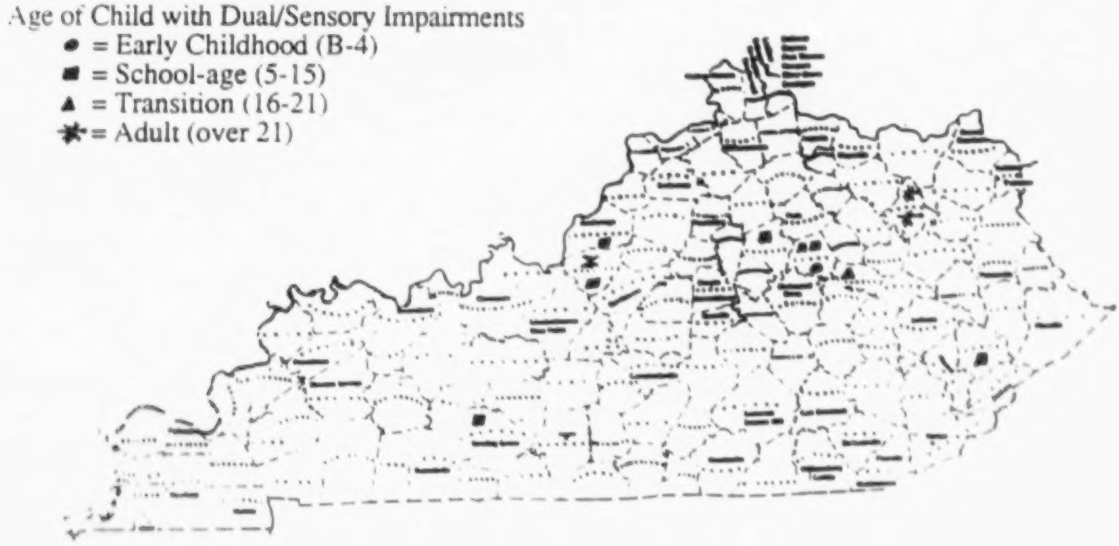
1.	Organization	6.8
2.	Objectives	6.7
3.	Work of Consultants	6.7
4.	Activities	6.9
5.	Scope	6.7
6.	Attendance shoul prove	6.7
7.	Overall rating	6.9

Figure 8

FAMILY FORUM

Objective 2.2
August 23-25, 1991

Family Forum Participants
- 42 Family Members
- 12 Families Represented
- (one family has 2 children with dual sensory impairments)



Age of Child with Dual/Sensory Impairments
- ● = Early Childhood (B-4)
- ■ = School-age (5-15)
- ▲ = Transition (16-21)
- ✱ = Adult (over 21)

FAMILY FORUM EVALUATION DATA

Content
- Overview of Personal Futures Planning
- Personal Profile Development (with facilitator)
- Planning Meeting Development
- Planned respite activities for children with dual sensory impairments and their siblings

Evaluation (out of a 1 to 7 scale with 7 as high score).

		Average
1.	Organization	6.7
2.	Objectives	6.5
3.	Work of Consultants	6.9
4.	Ideas/Activities	6.7
5.	Scope	6.6
6.	Attendance should prove	6.9
7.	Overall rating	6.7

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Figure 9

KENTUCKY DEAF BLIND INTERVENTION PROGRAM

October 1, 1990 - September 30, 1991

CALENDAR OF EVENTS

Date	Objective	Description
FIRST REPORTING PERIOD		
October 3-5	3.4	Support Document Training Session-Prestonsburg
October 10	4.1	SHIPP Administrator Training (4 administrators)
October 11	1.0	Joint Staff Meeting with System's Change
October 13	3.4	Support Document Training Session - CEC Mini-Conference - EKU
October 16	3.4	Support Document Training Session (Carrollton)
October 16	2.1	Bowling Green - Consultation with System's Change
October 23-26	4.1	SHIPP Training - Fall Module II (38 service providers)
October 27	3.4	Inservice for emergency certified MH/SPH teachers
October 25	5.2	Transition: Joint Consultation with Helen Keller Affiliate
October 26	5.2	Transition: Joint Consultation with Helen Keller Affiliate
October 30	3.2	Pilot Pre-service Modules at the University of Kentucky
November 1	1.0	System's Change Advisory Board Meeting
November 5-8	1.0	Project Director's Meeting
November 26	3.4	Support Document Training Session (Ohio County)
November 28-30	4.1	SHIPP - Fall Module III
November 28-30	3.3	SPLASH Training - Presentation on Integration
December 11	1.0	Joint Staff Meeting with System's Change
December 19	1.0	Deaf Blind Intervention Program meeting
January 11	2.1	Joint consultation with Systems Change (Christian County)
January 11	2.2	Kentucky SPIN Board meeting (Special Parent Information Network)
January 13-15	1.0	Winter Retreat - Deaf Blind Projects

January 17-18	3.4	Support Document Training Session (8 staff from University of Virginia)
January 23-25	4.1	SHIPP Training - Spring Module I (38 service providers)
January 29	1.0	Joint staff meeting with System's Change

SECOND REPORT PERIOD

February 1 & 2	1.0	TASH Kentucky Conference
February 5	1.0	Systems Change Advisory Board Meeting
February 6	3.4	Support Document Training Session - Bullitt County
February 8	3.4	Support Document Training Session - Christian County
February 8	3.4	Preschool Interagency Planning Council Conference - Presentation on Support Document
February 14	1.1	Kentucky Deaf-Blind Steering Committee
February 18	3.4	Support Document Training Session - Warren County
February 20	4.1	SHIPP Administrator Training (16 administrators)
February 26 - March 1	4.1	SHIPP Training - Spring Module II (35 people trained)
March 2	2.2	Parent Advisory Board Meeting
March 5	1.0	Joint Staff Meeting with Systems Change
March 6	2.1	Joint Consultation with Systems Change
March 7	4.1	SHIPP follow-up consultation
March 12	3.4	Support Document Training Session - Boone County
March 15	3.4	Presentations (3) at Kentucky CEC Conference
March 16	2.2	Presentation at Parent Professional Conference
March 21	4.1	SHIPP follow-up consultation
March 26	4.2	CORE Team meeting (early childhood)
March 27 - 29	4.1	SHIPP Training - Spring Module III
April 9	1.0	Joint Staff Meeting with Systems Change
April 11	1.1	Transition Sub-committee meeting
April 16	4.2	Meeting with Preview (Low Vision) Training Team

April 19	1.0	Poster Session at AER Conference
April 23	2.1	Joint Consultation with Systems Change
April 29	2.2	KY-SPIN Governing Board Meeting
May 1	1.0	Systems Change Advisory Board Meeting
May 2	4.2	Development of RFP for Low Incidence Early Childhood Grants
May 3	4.1	SHIPP follow-up consultation
May 6	1.0	Joint Staff Meeting with Systems Change
May 7 & 8	1.0	Personal Futures Planning Workshop (Inclusion Workshop)
May 7	4.1	SHIPP follow-up consultation
May 13	3.4	Support Document Inservice - KSD
May 14 & 15	3.1	Faculty Seminar
May 23	1.0	Staff attended Technology Workshop for Persons with Sensory Impairments
May 30	4.0	Presentation to Head Start Special Services Coordinators

THIRD REPORTING PERIOD

June 8	2.2	Parent Advisory Board Meeting
June 12	3.0	"Schools are for all Kids" Training, Lexington Sponsored by KY Systems Change
June 12	5.2	Joint consultation with KY Helen Keller Affiliate
June 13	4.1	SHIPP Trainer Meeting
June 14	4.1	SHIPP - Consumer Review
June 17-18	1.0	Deaf/Blind Intervention Program Staff Retreat
June 20-21	1.0	Project Director's Meeting (Southcentral Region), San Antonio, Texas
June 24	3.2	Pilot of Preservice Modules - University of Kentucky
June 24-15	4.2	PREVIEW assessments
June 26	1.0	Kentucky Steering Committee for Deaf/Blind
June 27	3.0	CHR Training for Home Health Nurses
June 29	3.4	Support Document Training - VIPS Family Retreat, Louisville

July 1	1.0	Joint Staff Meeting
July 2	3.2	Pilot of Preservice Modules - University of Louisville
July 15	1.1	Transition sub-committee meeting
July 15-19	3.0	Summer Institute
July 22	4.2	PREVIEW Training
July 24-25	1.0	KY Systems Change Advisory Board Meeting
July 25	4.2	PREVIEW Training
July 31	5.2	Joint consultation with KY Helen Keller Affiliate
August 7	5.2	Joint consultation with KY Helen Keller Affiliate
August 16	1.0	DPIP Staff Meeting
August 19	5.1	Meeting with Transition Project staff
August 19	3.0	Personal Futures Planning Training
August 19-20	3.4	Support Document Training, Lexington
August 21	3.4	Support Document Training, Louisville
August 23	2.2	KY SPIN Board Meeting
August 23-25	2.2	Family Forum
August 28	5.2	Joint consultation with KY Helen Keller Affiliate
September 4	3.0	Personal Futures Planning Training
September 6	2.2	KY SPIN Board Meeting
September 9	5.2	Joint Consultation with KY Helen Keller Affiliate
September 12	5.1	Transition Training Workshop
September 16	1.0	Joint Staff Meeting with KY Systems Change
September 17	3.4	Support Document Training, Louisville
September 23-27	4.1	SHIPP Training - Module 1 (37 teachers)

SUMMARY OF PROGRESS TO DATE
October 1, 1990 - September 31, 1991
Progress by Activity

1.1 KENTUCKY DEAF-BLIND STEERING COMMITTEE

Description

The Kentucky Deaf-Blind Steering Committee is a state interagency advisory group which meets at least twice a year, with active subgroups on early childhood and transition. The committee was initiated in 1984

Status to Date:

- As a result of the June, 1990 Steering Committee, a grant was submitted to the Hilton/Perkins Foundation to establish a Parent Network in Kentucky for Parents/Families of Children with Cual Censory Impairments. That grant was funded in late Fall, 1990 in the amount of $4,200. It supports Activity 2.2 of the VI-C grant.
- Representatives from the Deaf/Blind Intervention Program, the Personal Futures Planning Project, and the Helen Keller Affiliateship (last two projects were initiated by the Steering Committee) met to discuss interagency collaboration in January, 1991. Part of the discussion from that meeting focussed on increased participation of the Transition subgroup of the Steering Committee which is the Advisory Board of the two projects.
- Full committee meetings in February and June, 1991. Presented at the June meeting were the Helen Keller Student of the Year Award and the Contributor of the Year Award. Also, at the June meeting, committee members were presented with the Governor's Proclamation of Helen Keller Week which occurred during the week of June 24-28.
- Transition sub-committee meetings in March and July, 1991. The Transition sub-committee, which serves as the Advisory Board of the Helen Keller Affiliateship and the Personal Futures Planning Project, will begin to focus on the development of a Consumer Support Group for transition students on the VI-C Registry and adults served by the Affiliateship.

2.1 LOCAL CONSULTATION TO AGENCIES AND FAMILIES

Description

The project provides on-site consultation visits at school and/or home for all children and youth referred to or placed on the VI-C Registry. There is also a computerized tracking system. The activity has been ongoing since 1983.

Status to Date:

- Onsite consultation visits provided to at least 34 infants, toddlers, children and youth during the first reporting period (October, 1990 - January 1991)
- Onsite consultation visits provided to at least 64 infants, toddlers, children and youth during the second reporting period (February, 1991 - May, 1991)
- Onsite consultation visits provided to at least 53 infants, toddlers, children and youth during the third reporting period (June, 1991 - September, 1991)
- Approximately 30-40 children on the caseload of the consultants . An additional 18 children on the caseload of the State Coordinator.
- Four (4) referrals since May, 1991 with 22 remaining in process.

2.2 PARENT OPPORTUNITIES

Description

The project provides for parents to attend the Parent/Professional Conference and other seminars, plus occasional small group get-togethers. This activity has been ongoing since 1986.

Status to Date

* Funding of Hilton/Perkins Grant (see Activity 1.1) to support and expand parent opportunities
* Two (2) Parent Advisory Board meetings conducted (March and June) in conjunction with Hilton/Perkins Parent Project.
* Newsletter disseminated to all parents with children on the VI-C Registry (December. April, July).
* Staff Presentation at Parent Professional Conference (March)
* Staff representation on KY SPIN (Kentucky Special Parent Involvement Network) governing board
* Parents with children on the VI-C Registry invited to Summer Institute (July).
* Second Annual Family Forum for families of children with Dual Sensory Impairments (Otter Creek Park, Louisville). Twelve families represented with 42 family members in attendance. This project was jointly sponsored by the Hilton/Perkins grant; Personal Futures Planning grant and Deaf-Blind Intervention Program.

Parents were not sponsored to go to the Parent Professional Conference this year due to the fact that the project did not receive advance notification about the conference early enough to inform parents.

3.1 SEMINAR FOR TMH FACULTY OF STATE UNIVERSITIES

Description

The project conducts a seminar retreat on curriculum, adaptations and other issues regarding services for individuals with dual sensory impairments, for relevant faculty from institutes of higher education in the state. This is an annual event since 1985.

Status to Date

* Possible topics and meeting dates discussed at Joint Staff meeting - January, 1991. Staff determined that other faculty member should be invited including those from Physical and Occupational Therapy Schools.
* Survey of possible topics sent to faculty - February, 1991.
* Faculty Seminar conducted (May). Seven faculty from 5 colleges/universities were in attendance. In addition to TMH faculty, there were two faculty members from the state's only Occupational Therapy school in attendance.

3.2 PRESERVICE MODULES FOR UNDERGRADUATE TMH COURSEWORK

The project is developing preservice modules on the nature and needs of individuals with dual sensory impairments, to be piloted in identified TMH courses at participating universities. The broad content and relationship to existing content in specific TMH undergraduate courses was developed under the previous project: 1987-89.

Status to Date

* Modules completed and disseminated at Faculty Seminar (Activity 3.1). A brief introduction to the format of the Modules was presented. Staff from the Deaf/Blind Intervention Program will be available to guest lecture on topics presented in the modules.
* Modules piloted 4 (four) times at 2 (two) universities (University of Kentucky and University of Louisville) by project staff.
* Module piloted at SHIPP training (Activity 4.1) in September (37 teachers)
* Editing completed (September). Edited versions disseminated.

3.3 PARTICIPATION IN SPLASH TRAINING FOR TEACHERS
(Strategies for Programming Longitudinally for All Severely Handicapped)

Description

The project staff teach topics in functional programming and integration for children with severe handicaps and dual sensory impairments covered by VI-C staff as part of a 10 day course taught for TMH and SPH teachers (SPLASH). The SPLASH training team is coordinated by the Systems Change Project. SPLASH was initiated in 1982; VI-C has participated since 1986.

Status to Date

- Fall 1990 semester completed with 30 teachers trained. Of the 30 teachers trained, 47% were from school districts serving students with dual sensory impairments.
- One session provided by VI-C staff which included a live demonstration of activity-oriented programming in an integrated group with children with severe handicaps and children without handicaps.
- One follow-up visit conducted with SPLASH trainer (May).

SPLASH is conducted in the fall semester only with follow-up in the spring semester. VI-C staff are aware of teachers who have been through the training and report to the Systems Change staff, during monthly joint staff meetings, the level of training implementation conducted in classrooms where joint consultation occurs.

3.4 INSERVICE IN THE SUPPORT DOCUMENT FOR TEACHERS

Description:

The project provides at least two workshops for teacher per year with the Systems Change Project on the contents of the document developed under the 1987-89 cooperative agreement: Kentucky Programs for Students with Severe Handicaps Including Deaf-Blindness, 1989. Content reflects the quality indicators listed under Activity 2.1 Local Consultation.

Status to Date

- Half day workshop conducted in October, 1990 for Mountain Mental Health/Mental Retardation Board, Inc. Includes services providers for 5 children on the VI-C Registry.
- Session conducted for special education teachers in October 1990 at Council for Exceptional Children Mini-conference at Eastern Kentucky University.
- Two-hour workshop conducted in October 1990 for teachers and ancillary personnel at one of the Systems Change Project model site districts.
- Full day workshop in October 1990 for 25 teachers serving TMH/SPH children and youth, as part of the Office of Education for Exceptional Children required training for emergency certification in TMH (strategy to address state teacher shortage).
- Half day workshop in November 1990 for school district serving a student with dual sensory impairments.
- Full day workshop in January 1991 for 8 staff from the University of Virginia.
- Inservices conducted in Bullitt, Christian, Warren Counties (February-May). There are children on the VI-C Registry in each of these counties.
- Presentation at Preschool Interagency Planning Council Conference (February). Topics covered included: embedded skills and activity oriented programming.
- Three presentation at the Kentucky Council for Exceptional Children Conference (March). Presentation topics included: embedded skill; activity - oriented programming; and community-referenced instruction.
- Informal inservice at Kentucky School for the Blind (May)
- Inservice for VIPS (Visually Impaired Preschool Services) Family Retreat (June)
- Inservice for Child Development Center (Lexington) for 30 teachers/service providers (August)

- Inservice at Binet School (Louisville) on behalf of a transition-aged student on the VI-C Registry (August)
- Informal inservice for dorm staff at Kentucky School for the Blind (September)

At the June Steering Committee meeting (see Activity 1.1), committee members discussed and accepted organizational changes in the delivery of services by the Deaf/Blind Intervention Program. In order to make the program more needs driven, all school systems/agencies serving students on the VI-C Registry were sent needs assessments in September with inservice topics (such as those in the Support Document). A drastic increase in the inservice delivery model is expected in the coming project year (October, 1991 - September,1992).

4.1 COORDINATION OF SHIPP TRAINING FOR CURRENT PROVIDERS
(Severe Handicaps: Integrated Preschool Programming)

Description
The project coordinates an intensive 10 day course (SHIPP) which is repeated each fall and spring semester for early childhood educators currently teaching young children with severe handicaps in Head Start, school districts, Comprehensive Care and private affiliates. There is an accompanying one-day leadership training workshop for administrators of those educators. SHIPP was initiated in 1988. Content reflects quality indicators listed under Activity 2.1 Local Consultation, with specific applications for children under 5.

Status to Date
- Fall 1990 and Spring 1991 semesters completed with 71 teachers (10 days) and 20 administrators (1 day).
- Four (4) follow-up consultations conducted.
- SHIPP trainer meeting (June)
- SHIPP consumer review meeting (June)

Like SPLASH (Activity 3.3), a portion (24%) of all SHIPP participants serve children with dual sensory impairments among other infants, toddlers and preschool children. SHIPP also serves as an important Child Find network for the VI-C Registry.

4.2 DEVELOPMENT OF KPDS SERVICES (unserved children)
Kentucky System of Parent Development

Description
Project staff provide assistance to the PL 99-457 lead agencies, Office of Education for Exceptional Children and Cabinet for Human Resources, in expanding direct in-home service to families of young children with hearing impairments (SKI*HI model) to include children with severe and multiple handicaps, including dual sensory impairments.

Status to Date
- Project staff provided technical assistance to a subcommittee of this group (PREVIEW) to develop an intensive 5 day training workshop for service providers of young children with visual impairments.
- Representation at CORE team meeting (March). This committee is composed of staffs from the lead agencies.
- Assistance with development of request for proposals for Low Incidence Early Childhood Grants. These grants will fund specialist positions in the areas of : hearing impaired; visually impaired; emotional/behavior disorders; and physical disabilities/complex health care needs.
- VI-C staff assistance with PREVIEW assessments (June and September)
- Attendance at PREVIEW training (July)

- Summer Institute - co-sponsored with Kentucky Systems Change Project, and entitled "Issues Regarding Students with Complex Health Care Needs" (July 15-19). The training consisted of a one day overview (approximately 120 service providers) and 4 days of intensive training (20 teachers and 8 students).

5.1 TRANSITION TRAINING FOR SCHOOL AND ADULT PROVIDERS

Description
The project will provide local mentoring and a training workshop for families and local service providers in ITPs (individual transition plans) and personal futures planning.

Status to Date
- Informal training on ITPs occurring during 12 consultation visits on behalf of youth with dual sensory impairments.
- Attendance at REACH Conference in Louisville in January, 1990. Session on Personal Futures Planning.
- Joint collaboration with Personal Futures planning at Winter Retreat in January 1990
- Personal Futures Training at Family Forum (Activity 2.2). VI-C staff served as facilitators.
- VI-C staff involved with 14 students participating in Personal Futures Planning Project. Attend all related meetings.
- Meeting with STAF (Statewide Training and Facilitating Project) Transition Project to determine role DPIP can take in implementing transition training in cooperation with existing state training.
- Transition consultant attended Transition Training sponsored by Kentucky Department of Education (September).

The Kentucky Department of Education has conducted training for all Special Education Personnel. They have developed an ITP that most school districts are now using. The DBIP will no longer be doing separate training. Rather, the project will focus attention on assuring that parents of transition age students receive information in the Transition Process. Further, DBIP will continue to work closely with the Personal Futures Planning Project to conceptualize the relationship between these two processes.

5.2 COORDINATION WITH HKNC REPRESENTATIVE AND AFFILIATE

Description
Project staff conducts joint client visits approximately 2-4 times per year with the Helen Keller National representative from Atlanta.

Status to Date
- Representative from HKNC attended the Deaf/Blind Winter Retreat in January 1991 to assist in coordination of projects for persons with dual sensory impairments (Activity 1.0)
- Six (6) joint visits with the Kentucky Helen Keller Affiliate on behalf of clients on the VI-C Registry.
- Representative from HKNC attended the Transition sub-committee meeting (July).

PROJECT MANAGEMENT

INTERAGENCY COORDINATION

Early childhood activities are based on objectives which appear in the state's plans under both Part 619 (Part B for 3-5 year olds) and Part H (infant toddler program). Kentucky's two lead agencies have been active on the Steering Committee since 1983 and have initiated and/or support DBIP activity in early childhood. Both SHIPP and KPDS demonstrate collaborative use of P.L. 99-457 funds to serve young children with severe handicaps including dual sensory impairments, utilizing VI-C technical assistance. Many local agencies have attended SHIPP, serve young children on the VI-C Registry, and/or make referrals to the DBIP.

Collaboration with other federal programs affecting children and youth with dual sensory impairments includes:

Office of Education for Exceptional Children (EHA B)

The VI-C project collaborates with the following Part B funded initiatives from OEEC's state share restricted
- SPLASH (Activity 3.3)
- Parent/Professional Partnership (Activity 2.2)
- SHIPP (Activity 4.1)

OEEC's Systems Change Project for Individuals with Severe Handicaps (Part C)

OEEC closely monitors and conducts monthly joint staff meetings with the DBIP and the Systems Change Project for cooperative efforts and non-duplication of services. Collaborative efforts include: CSPS, local consultation, Steering Committees, transition, summer institute for local teams on integration. The VI-C coordinator continues to receive partial funding (0.2 FTS) through the Systems Change Project. In addition, the Personal Futures Planning Project is a collaborative effort of Systems Change and DBIP. Staff from the Personal Futures Planning Project are now included in all joint staff meetings. The transition subgroup of the Steering Committee is the Advisory Board for this Project. Collaboration also occurs between Personal Futures Planning Project and the recently funded Hilton/Perkins Project.

Helen Keller National Center Technical Assistance Center (Part C)

Kentucky's transition subgroup of the Steering Committee is the advisory board for the Kentucky HKNC Affiliateship.

Teaching Research Assistance to Children and Youth Experiencing Sensory Impairments (TRACES)

Technical Assistance provided at Deaf/Blind Winter Retreat to facilitate collaborative efforts of Kentucky's projects serving persons with dual sensory impairments. Technical assistance is also being provided for the 1991 Summer Institute.

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DISSEMINATION

Project activities and awareness of the needs of individuals with dual sensory impairments are disseminated through the following mechanisms:

(1) Kentucky Deaf-Blind Steering Committee
Members receive agendas, materials, newsletter and minutes of meetings and advise their respective agencies about needs and services.

(2) Direct Mail
Addresses of all parents, teachers and other service providers of individuals on the Registry are maintained on a computerized system. Whenever a training activity is announced, such persons receive direct mail information.

(3) Newsletters
- INSIGHT - THE OFFICIAL NEWSLETTER OF THE DEAF/BLIND INTERVENTION PROGRAM is disseminated to all parents and Steering Committee members. Training activities and programs are also announced through existing statewide publications:
- OEEC Memorandum: to all special educators
- Information Exchange: OEEC's parent newsletter
- SPLASH FLASH: to all teacher of students with moderate and severe handicaps
- KIDBITS: KSB's parent newsletter

(4) Workshops and Inservice Seminars
Participants include both teachers, providers and parents of individuals on the VI-C Registry as well as other interested persons. All workshops include both groups, although financial assistance and priority on available opening in registration are given to those with students on the Registry (See project activities).